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For calendar year 2016, or tax year beginning 06-01-2016, and ending 05-31-2017

Name of foundation THE GEORGE T BAKER FOUNDATION INC		A Employer identification number 59-6151202	
Number and street (or P O box number if mail is not delivered to street address) PO BOX 5869		Room/suite	B Telephone number (see instructions) (336) 884-0410
City or town, state or province, country, and ZIP or foreign postal code HIGH POINT, NC 27262		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 2,052,150	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis )	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

Part 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)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	3 Interest on savings and temporary cash investments . . . . .	752	752		
	4 Dividends and interest from securities . . . . .	35,888	35,888		
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	-1,521			
	b Gross sales price for all assets on line 6a 327,903				
	7 Capital gain net income (from Part IV, line 2) . . . . .		0		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .	1,338	1,338		
	12 Total. Add lines 1 through 11 . . . . .	36,457	37,978		
	13 Compensation of officers, directors, trustees, etc	15,750	7,875		0
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .				
	b Accounting fees (attach schedule) . . . . .	8,820	4,410		0
	c Other professional fees (attach schedule) . . . . .				
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . . . .	682	0		0
	19 Depreciation (attach schedule) and depletion . . . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	4,573	4,188		0
	24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .	29,825	16,473		0
	25 Contributions, gifts, grants paid . . . . .	100,000			100,000
	26 Total expenses and disbursements. Add lines 24 and 25	129,825	16,473		100,000
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-93,368			
	b Net investment income (if negative, enter -0-)		21,505		
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value			
Assets	1	Cash—non-interest-bearing . . . . .	243,167	124,700	124,700		
	2	Savings and temporary cash investments . . . . .					
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	5	Grants receivable . . . . .					
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .					
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____					
	8	Inventories for sale or use . . . . .					
	9	Prepaid expenses and deferred charges . . . . .					
	10a	Investments—U S and state government obligations (attach schedule)					
	b	Investments—corporate stock (attach schedule) . . . . .	613,480	660,397	959,625		
	c	Investments—corporate bonds (attach schedule) . . . . .					
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
	12	Investments—mortgage loans . . . . .					
	13	Investments—other (attach schedule) . . . . .	644,360	625,542	967,825		
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
15	Other assets (describe ▶ _____)						
16	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	1,501,007	1,410,639	2,052,150			
Liabilities	17	Accounts payable and accrued expenses . . . . .					
	18	Grants payable . . . . .					
	19	Deferred revenue . . . . .					
	20	Loans from officers, directors, trustees, and other disqualified persons					
	21	Mortgages and other notes payable (attach schedule) . . . . .					
	22	Other liabilities (describe ▶ _____)					
	23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	0			
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.						
	24	Unrestricted . . . . .					
	25	Temporarily restricted . . . . .					
	26	Permanently restricted . . . . .					
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.						
	27	Capital stock, trust principal, or current funds . . . . .	158,719	158,719			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0			
	29	Retained earnings, accumulated income, endowment, or other funds	1,342,288	1,251,920			
30	<b>Total net assets or fund balances</b> (see instructions) . . . . .	1,501,007	1,410,639				
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) .	1,501,007	1,410,639				

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

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	1	1,501,007
2	Enter amount from Part I, line 27a . . . . .	2	-93,368
3	Other increases not included in line 2 (itemize) ▶ _____	3	3,000
4	Add lines 1, 2, and 3 . . . . .	4	1,410,639
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	1,410,639

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
<b>1a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	<div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>	<b>2</b>	-1,521
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		<b>3</b>	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?



Yes



No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

**1** Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015	103,678	1,916,200	0 054106
2014	101,410	2,113,283	0 047987
2013	68,100	2,064,897	0 032980
2012	72,950	1,962,997	0 037163
2011	50,800	1,884,670	0 026954
<b>2</b> Total of line 1, column (d)			<b>2</b> 0 199190
<b>3</b> 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 existence if less than 5 years			<b>3</b> 0 039838
<b>4</b> Enter the net value of noncharitable-use assets for 2016 from Part X, line 5			<b>4</b> 1,937,814
<b>5</b> Multiply line 4 by line 3			<b>5</b> 77,199
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)			<b>6</b> 215
<b>7</b> Add lines 5 and 6			<b>7</b> 77,414
<b>8</b> Enter qualifying distributions from Part XII, line 4			<b>8</b> 100,000

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	215
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	215
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	215
<b>6</b>	Credits/Payments		
<b>a</b>	2016 estimated tax payments and 2015 overpayment credited to 2016	<b>6a</b>	360
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	360
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . ▶	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . . ▶	<b>10</b>	145
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2017 estimated tax</b> ▶ 145 <b>Refunded</b> ▶	<b>11</b>	0

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	<b>1a</b>	No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . . <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ _____ 0 (2) On foundation managers ▶ \$ _____ 0		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____ 0		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities</i>	<b>2</b>	No
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T</i>	<b>5</b>	No
<b>6</b> 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 conflict with the state law remain in the governing instrument? . . . . .	<b>6</b>	No
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i> . . . . .	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ _____		
<b>b</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) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	<b>8b</b>	Yes
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i> . . . . .	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> . . . . .	<b>10</b>	No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	<b>11</b>		<b>No</b>
<b>12</b>	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>►</b> N/A	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of <b>►</b> PATRICIA L WALSH Telephone no <b>►</b> (336) 884-0410			

Located at **►** PO BOX 5869 HIGH POINT NCZIP+4 **►** 27262

<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . <b>►</b> <b>15</b>			
<b>16</b>	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," enter the name of the foreign country <b>►</b>	<b>16</b>	<b>Yes</b>	<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required****File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

<b>1a</b>	During the year did the foundation (either directly or indirectly)		<b>Yes</b>	<b>No</b>
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days ). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. <b>►</b> <input type="checkbox"/>	<b>1b</b>		
<b>c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016? <input type="checkbox"/>	<b>1c</b>		<b>No</b>
<b>2</b>	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
<b>a</b>	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <b>►</b> 20____, 20____, 20____, 20____			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions ). <input type="checkbox"/>	<b>2b</b>		
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here <b>►</b> 20____, 20____, 20____, 20____			
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016 ). <input type="checkbox"/>	<b>3b</b>		
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	<b>4b</b>		<b>No</b>

<b>5a</b>	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))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>b</b>	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?	<input type="checkbox"/>	<b>5b</b>
<b>c</b>	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	If "Yes," attach the statement required by Regulations section 53.4945–5(d)		
<b>6a</b>	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>b</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>6b</b>
	If "Yes" to 6b, file Form 8870		<b>No</b>
<b>7a</b>	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>b</b>	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	<input type="checkbox"/>	<b>7b</b>

**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				

**2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."**

[illegible]

<b>Total</b> number of other employees paid over \$50,000.	0
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**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** *(continued)*

**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. . . . . ►		0

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
2	
3	
4	

**Part IX-B Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 . . . . . ►	



**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	1,754,147
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	213,177
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	1,967,324
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	1,967,324
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	29,510
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	1,937,814
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	96,891

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	96,891
<b>2a</b>	Tax on investment income for 2016 from Part VI, line 5.	<b>2a</b>	215
<b>b</b>	Income tax for 2016 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	215
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	96,676
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	0
<b>5</b>	Add lines 3 and 4.	<b>5</b>	96,676
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	96,676

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	100,000
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	100,000
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	<b>5</b>	215
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	99,785

**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 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
<b>1</b> Distributable amount for 2016 from Part XI, line 7				96,676
<b>2</b> Undistributed income, if any, as of the end of 2016				
<b>a</b> Enter amount for 2015 only. . . . .			91,164	
<b>b</b> Total for prior years 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2016				
<b>a</b> From 2011. . . . .				
<b>b</b> From 2012. . . . .				
<b>c</b> From 2013. . . . .				
<b>d</b> From 2014. . . . .				
<b>e</b> From 2015. . . . .				
<b>f</b> Total of lines 3a through e. . . . .	0			
<b>4</b> Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ <u>100,000</u>				
<b>a</b> Applied to 2015, but not more than line 2a			91,164	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2016 distributable amount. . . . .				8,836
<b>e</b> Remaining amount distributed out of corpus	0			
<b>5</b> Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a) )	0			0
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> 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		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 . . . . .				87,840
<b>7</b> 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			
<b>8</b> Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions). . . .	0			
<b>9</b> Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a . . . . .	0			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2012. . . . .				
<b>b</b> Excess from 2013. . . . .				
<b>c</b> Excess from 2014. . . . .				
<b>d</b> Excess from 2015. . . . .				
<b>e</b> Excess from 2016. . . . .				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling. . . . . ▶

**b** Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information** (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed

**b** The form in which applications should be submitted and information and materials they should include

**c** Any submission deadlines

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

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 recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b>			<b>▶ 3a</b>	100,000
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b>			<b>▶ 3b</b>	0

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

Enter gross amounts unless otherwise indicated

**1** Program service revenue**a** \_\_\_\_\_**b** \_\_\_\_\_**c** \_\_\_\_\_**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. . . . .**5** Net rental income or (loss) from real estate**a** Debt-financed property. . . . .**b** Not debt-financed property. . . . .**6** Net rental income or (loss) from personal property**7** Other investment income. . . . .**8** Gain or (loss) from sales of assets other than inventory . . . . .**9** Net income or (loss) from special events**10** Gross profit or (loss) from sales of inventory**11** Other revenue **a** \_\_\_\_\_**b** \_\_\_\_\_**c** \_\_\_\_\_**d** \_\_\_\_\_**e** \_\_\_\_\_**12** Subtotal. Add columns (b), (d), and (e). . . . .**13 Total.** Add line 12, columns (b), (d), and (e). . . . . **13** 36,457  
(See worksheet in line 13 instructions to verify calculations )**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes****Line No.**

Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions )

## Part XVII

- |       | Yes | No |
|-------|-----|----|
| 1a(1) |     | No |
| 1a(2) |     | No |
| 1b(1) |     | No |
| 1b(2) |     | No |
| 1b(3) |     | No |
| 1b(4) |     | No |
| 1b(5) |     | No |
| 1b(6) |     | No |
| 1c    |     | No |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

- b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

**Sign  
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

May the IRS discuss this return with the preparer shown below (see instr )? ☒ Yes ☐ No

**Paid  
Preparer  
Use Only**

Print/Type preparer's name  PATRICIA L WALSH	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN  P00012605
Firm's name ▶ SHARRARD MCGEE & CO PA				Firm's EIN ▶ 56-1146197
Firm's address ▶ PO BOX 5869  HIGH POINT, NC 27262				Phone no (336) 884-0410

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
HOME DEPOT, INC	P	2015-06-25	2016-06-10
HOME DEPOT, INC	P	2016-06-25	2016-08-24
HOME DEPOT, INC	P	2016-06-28	2016-08-24
L BRANDS INC	P	2015-09-02	2016-06-10
VERIZON COMMUNICATIONS	P	2016-02-01	2016-08-24
BLACKROCK INC	P	2014-08-25	2016-06-10
BLACKROCK INC	P	2014-09-02	2016-06-10
HOME DEPOT, INC	P	2015-05-08	2016-06-10
L BRANDS INC	P	2014-12-02	2016-06-10
L BRANDS INC	P	2014-08-25	2016-06-10

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
3,215		2,839	376
4,598		3,861	737
4,733		4,406	327
1,637		1,526	111
7,337		7,116	221
2,788		2,666	122
2,788		2,633	155
1,157		1,015	142
4,773		5,643	-870
3,682		3,456	226

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			376
			737
			327
			111
			221
			122
			155
			142
			-870
			226

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
NEXTERA ENERGY INC	P	2014-12-02	2016-09-29
LAMB WESTON HOLDINGS	P	2016-03-24	2016-11-14
CVS HEALTH	P	2015-12-22	2016-11-22
ADVANSIX INC	P	2014-12-02	2016-12-08
AMGEN INC	P	2014-12-02	2016-12-06
APPLE INC	P	2014-08-25	2016-12-08
BLACKROCK INC	P	2014-12-02	2016-12-22
CROWN CASTLE INTL	P	2015-02-17	2016-12-08
HONEYWELL INTL	P	2015-08-12	2016-12-08
JP MORGAN CHASE	P	2014-09-02	2016-12-08

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
3,997		3,350	647
3,210		3,258	-48
9,108		12,004	-2,896
41		27	14
10,492		12,652	-2,160
7,285		6,617	668
6,173		5,643	530
6,970		7,207	-237
3,118		2,811	307
2,711		1,902	809

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			647
			-48
			-2,896
			14
			-2,160
			668
			530
			-237
			307
			809



**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
MEDTRONIC PLC	P	2015-06-25	2016-12-08
MICROSOFT CORP	P	2015-10-08	2016-12-08
PEPSICO INC	P	2015-03-24	2016-12-08
PHILIP MORRIS INTL	P	2014-08-25	2016-12-08
RAYTHEON CO	P	2014-08-25	2016-12-08
SEMPRA ENGERY	P	2015-09-22	2016-12-08
ADVANSIX INC	P	2016-02-01	2016-12-08
AMGEN INC	P	2016-06-28	2016-12-08
BLACKROCK INC	P	2016-12-08	2016-12-22
COMCAST CORP	P	2016-02-01	2016-12-08

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
5,309		5,613	-304
3,732		2,856	876
5,528		5,199	329
8,133		7,755	378
7,402		4,931	2,471
4,158		3,936	222
41		31	10
699		729	-30
2,701		2,695	6
6,917		5,589	1,328

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-304
			876
			329
			378
			2,471
			222
			10
			-30
			6
			1,328

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
CONAGRA BRANDS	P	2016-02-01	2016-12-08
CONSTELLATION BRANDS	P	2016-02-01	2016-12-08
ESTEE LAUDER	P	2016-02-01	2016-12-08
GILEAD SCIENCE	P	2016-02-01	2016-12-08
IBM	P	2016-03-03	2016-12-08
OCCIDENTAL PETROLEUM	P	2016-08-24	2016-12-08
PFIZER INC	P	2016-08-24	2016-12-08
SCHLUMBERGER LTD	P	2016-02-01	2016-12-08
L BRANDS INC	P	2016-12-08	2017-01-12
VERIZON COMMUNICATIONS	P	2016-12-08	2017-01-12

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
3,390		2,922	468
7,081		7,262	-181
7,800		8,487	-687
5,981		7,066	-1,085
3,139		2,616	523
8,174		9,264	-1,090
6,415		7,328	-913
3,779		3,221	558
7,028		8,727	-1,699
10,954		10,634	320

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			468
			-181
			-687
			-1,085
			523
			-1,090
			-913
			558
			-1,699
			320

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
CONAGRA BRANDS	P	2016-03-24	2017-02-17
SUMITOMO MITSUI FINL	P	2016-12-08	2017-02-10
TRANSOCEAN LTD	P	2016-12-08	2017-02-17
EOG RESOURCES	P	2016-12-08	2017-03-09
ROYAL DUTCH SHELL PLC	P	2016-12-08	2017-03-09
CAPITAL ONE FINANCIAL	P	2016-12-08	2017-04-13
NIPPON TELEGRAPH & TELEPHONE	P	2017-01-17	2017-04-26
NRG YIELD INC	P	2017-01-25	2017-04-13
ALPHABET INC	P	2016-02-01	2017-05-16
CHEVRON CORP	P	2016-02-01	2017-05-16

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
9,574		8,141	1,433
11,956		12,432	-476
10,952		12,230	-1,278
9,623		10,628	-1,005
11,590		12,163	-573
10,871		12,138	-1,267
10,467		10,990	-523
10,808		10,861	-53
2,889		2,312	577
214		171	43

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			1,433
			-476
			-1,278
			-1,005
			-573
			-1,267
			-523
			-53
			577
			43

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
NEXTERA ENERGY INC	P	2014-12-02	2017-05-16
AMGEN INC	P	2017-02-10	2017-05-16
BOEING CO	P	2016-12-22	2017-05-16
CROWN CASTLE INTL	P	2017-02-17	2017-05-16
FIFTH 3RD BANCORP	P	2016-12-08	2017-05-16
GOLDMAN SACHS	P	2016-12-08	2017-05-16
INGERSOLL-RAND PLC	P	2016-12-08	2017-05-16
JOHNSON & JOHNSON	P	2017-02-17	2017-05-16
MEDTRONIC PLC	P	2017-02-10	2017-05-16
NEXTERA ENERGY INC	P	2016-12-08	2017-05-16

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
4,362		3,350	1,012
639		672	-33
2,189		1,887	302
2,410		2,229	181
11,248		12,172	-924
11,261		11,980	-719
4,251		3,753	498
3,829		3,553	276
168		152	16
136		117	19

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			1,012
			-33
			302
			181
			-924
			-719
			498
			276
			16
			19

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

List and describe the kind(s) of property sold (e g , real estate, <b>(a)</b> 2-story brick warehouse, or common stock, 200 shs MLC Co )	<b>(b)</b> How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo , day, yr )	<b>(d)</b> Date sold (mo , day, yr )
SENTINEL LTG DISTRIBUTION	P		2016-12-31

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

<b>(e)</b> Gross sales price	Depreciation allowed <b>(f)</b> (or allowable)	Cost or other basis <b>(g)</b> plus expense of sale	Gain or (loss) <b>(h)</b> (e) plus (f) minus (g)
292			292

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			<b>(l)</b> Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
<b>(i)</b> F M V as of 12/31/69	Adjusted basis <b>(j)</b> as of 12/31/69	Excess of col (i) <b>(k)</b> over col (j), if any	
			292

**Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
BARBARA I BAKER BEAHN PO BOX 467 BLOWING ROCK, NC 28605	CHAIRMAN 1 00	3,150	0	0
RAYMOND BEAHN PO BOX 467 BLOWING ROCK, NC 28605				
PATRICIA WALSH PO BOX 5869 HIGH POINT, NC 27262	PRESIDENT 1 00	3,150	0	0
PATRICIA A CORBETT 4613 SELKIRK DRIVE SNELLVILLE, GA 30039				
RAYMOND BEAHN JR 8705 BUCKSKIN MANOR DAVIE, FL 33328	VICE-PRESIDENT 1 00	3,150	0	0
HALEY BEAHN 8705 BUCKSKIN MANOR DAVIE, FL 33328				

**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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ALLIANCE THEATRE 1280 PEACHTREE STREET NE ATLANTA, GA 30309	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	500
APPALACHAIN STATE UNIVERSITY FOUNDATION ASU BOX 3205 BOONE, NC 28608	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	5,000
ATLANTA COMMUNITY FOOD BANK 732 JOSEPH E LOWERY BLVD NW ATLANTA, GA 30318	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	1,000
ATLANTA HUMANE SOCIETY 981 HOWELL MILL ROAD NW ATLANTA, GA 30318	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	500
ATLANTA MISSION PO BOX 1807 ATLANTA, GA 303049904	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	1,000
<b>Total . . . . . ►</b> <b>3a</b>				100,000


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
AVERY COUNTY HABITAT FOR HUMANITY PO BOX 1016 NEWLAND, NC 28657	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	500
AVERY COUNTY HUMANE SOCIETY 279 NEW VALE ROAD NEWLAND, NC 28657	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	5,000
AVERY COUNTY RESCUE SQUAD PO BOX 155 ELK PARK, NC 28622	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	2,000
BANNER ELK VOLUNTEER FIRE DEPARTMENT 345 SHAWNEEHAW AVE S BANNER ELK, NC 28604	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	500
BLOWING ROCK CHARITY HORSE SHOW FOUNDATION PO BOX 650 BLOWING ROCK, NC 28605	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	5,000
<b>Total . . . . .</b> ► <b>3a</b>				100,000



**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BLOWING ROCK COMMUNITY FOUNDATION PO BOX 525 BANNER ELK, NC 28605	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	8,000
BLOWING ROCK FIRE AND RESCUE 8001 VALLEY BOULEVARD BLOWING ROCK, NC 28605	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	1,000
CAMILLUS HOUSE PO BOX 011829 MIAMI, FL 331011829	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	500
CENTER FOR GREAT APES PO BOX 488 WAUCHULA, FL 33873	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	5,000
CHARLOTTE HANS FOUNDATION 10130 NORTHLAKE BLVD 212 WEST PALM BEACH, FL 33412	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	2,000
<b>Total . . . . .</b> ► <b>3a</b>				100,000


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
COMMUNITY CLUB OF BLOWING ROCK PO BOX 166 BLOWING ROCK, NC 28605	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	500
CORPUS CHRISTIE CATHOLIC CHURCH 600 MOUNTAIN VIEW DR STONE MOUNTAIN, GA 30063	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	500
CROSSNORE SCHOOL PO BOX 249 CROSSNORE, NC 28616	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	2,000
DOCTORS WITHOUT BORDERS USA 333 7TH AVENUE 2ND FLOOR NEW YORK, NY 100015004	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	1,000
EVERGLADES OUTPOST WILDLIFE RESCUE 35601 SW 192 AVENUE HOMESTEAD, FL 33034	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	500
<b>Total . . . . . ▶</b> <b>3a</b>				100,000

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FIRST CHRISTIAN CHURCH OF ATLANTA 4532 LAVISTA ROAD TUCKER, GA 30084	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	500
FOOD BANK OF CENTRAL & EASTERN NC 3808 TARHEEL DRIVE RALEIGH, NC 27609	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	2,500
FRIENDS OF AMERICAN LAKE VETERANS GOLF COURSE PO BOX 99608 LAKEWOOD, WA 98496	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	1,000
GEORGIA PUBLIC TV 260 14TH ST NW ATLANTA, GA 30318	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	1,000
HIGH POINT ARTS COUNCIL PO BOX 5526 HIGH POINT, NC 27262	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	2,000
<b>Total</b> . . . . . 				100,000
<b>3a</b>				

**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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HOLY CROSS CATHOLIC CHURCH 616 S CHERRY ST KERNERSVILLE, NC 27284	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	1,000
HORSE HELPERS OF THE HIGH COUNTRY 1199 ODES WILSON ROAD ZIONVILLE, NC 28698	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	2,000
HOSPICE OF THE PIEDMONT 1801 WESTCHESTER DRIVE HIGH POINT, NC 27262	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	500
LEES-MCRAE COLLEGE PO BOX 128 BANNER ELK, NC 28604	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	2,500
LINVILLE CENTRAL RESCUE SQUAD PO BOX 716 NEWLAND, NC 28657	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	1,000
<b>Total . . . . . ▶</b> <b>3a</b>				100,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MARINE TOYS FOR TOTS FOUNDATION PO BOX 227 QUANTICO, VA 221340227	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	500
MIAMI RESCUE MISSION 2159 NW 1ST COURT MIAMI, FL 33127	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	500
OASIS PO BOX 1591 BOONE, NC 28607	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	500
OCEAN ADVENTURES INC 20810 SW 86TH AVE MARION, FL 33189	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	1,000
SALVATION ARMY - BOONE PO BOX 1568 BOONE, NC 286011568	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	2,000
<b>Total . . . . .</b> ► <b>3a</b>				100,000

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SALVATION ARMY - MIAMI PO BOX 350370 MIAMI, FL 33142	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	1,000
SANDHILLS COMMUNITY COLLEGE FOUNDATION 3395 AIRPORT RD PINEHURST, NC 28374	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	10,000
SECOND HARVEST FOOD BANK OF NORTHWEST NC 3655 REED ST WINSTONSALEM, NC 27107	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	1,000
SMILE TRAIN PO BOX 96231 WASHINGTON, DC 20090	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	500
SPECIAL OLYMPICS 2200 GATEWAY GENTRE BLVD STE 201 MORRISVILLE, NC 27560	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	500
<b>Total</b> . . . . . 				100,000
<b>3a</b>				

**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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ST JOSEPH'S CATHOLIC CHURCH 8670 BYRON AVE MIAMI BEACH, NC 33141	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	1,000
ST JUDE'S CHILDREN'S HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 381051942	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	1,000
TEMPLE OF THE HIGH COUNTRY PO BOX 2895 BOONE, NC 28607	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	500
THE BICYCLEMAN 624 PLATINUM STREET FAYETTEVILLE, NC 28311	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	1,000
THE FRESH AIR FUND 633 THIRD AVE 14TH FLOOR NEW YORK, NY 10017	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	2,000
<b>Total . . . . . ▶</b> <b>3a</b>				100,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
UNC TV 10 TW ALEXANDER DRIVE RESEARCH TRIANGEL PARK, NC 277094900	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	1,000
UNITED NEGRO COLLEGE FUND 3550 BISCAYNE BLVD STE 603 MIAMI, FL 33137	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	500
WALTHOUR-MOSS FOUNDATION 91A ALLENS POINT MARION, MA 02738	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	2,500
WATAUGA COUNTY EMERGENCY RESCUE SQUAD PO BOX 3487 BOONE, NC 28607	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	1,000
WATAUGA HUMANE SOCIETY 196 PAUL CRITCHER DR BOONE, NC 28607	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	5,500
<b>Total</b> . . . . . 				100,000
<b>3a</b>				



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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WPBT2 PO BOX 610002 MIAMI, FL 332610002	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	500
YELLOW MOUNTAIN ENTERPRISES PO BOX 548 NEWLAND, NC 28657	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	500
YMCA OF AVERY COUNTY PO BOX 707 LINVILLE, NC 28646	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	1,000
THE VILLAGE FOUNDATION PO BOX 2716 BLOWING ROCK, NC 28605	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	500
HANDY CAPABLE NETWORK 415 N EDGEWORTH ST STE 175 GREENSBORO, NC 27401	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	1,000
<b>Total . . . . .</b> <b>3a</b>				100,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BLUE RIDGE PARKWAY FOUNDATION 717 S MARSHALL ST STE 105 B WINSTONSALEM, NC 27101	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	1,000
OPERATION WHEELCHAIR 538 MAYVIEW ST FAYETTEVILLE, NC 28306	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	2,000
NCHJA 4441 SIX FORKS RD STE 106-167 RALEIGH, NC 27609	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	2,500
LADIES EMPOWERMENT AND ACTION PROGRAM PO BOX 848 MIAMI, FL 33243	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	1,000
RONALD MCDONALD HOUSE OF ATLANTA 795 N GATEWOOD RD NE ATLANTA, GA 30329	NONE	IRC SECTION 501(C)(3)	IMPROVE QUALITY OF LIFE FOR INDIVIDUALS AND ANIMALS	500
<b>Total . . . . .</b> 				100,000
<b>3a</b>				

**TY 2016 Accounting Fees Schedule****Name:** THE GEORGE T BAKER FOUNDATION INC**EIN:** 59-6151202

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
SHARRARD, MCGEE & CO , PA	8,820	4,410		0

**TY 2016 Investments Corporate Stock Schedule****Name:** THE GEORGE T BAKER FOUNDATION INC**EIN:** 59-6151202

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
INVESTMENTS-ACCT 800	379,899	649,939
INVESTMENTS-ACCT 778	280,498	309,686

**TY 2016 Investments - Other Schedule****Name:** THE GEORGE T BAKER FOUNDATION INC**EIN:** 59-6151202

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
ONEAK PARTNERS	AT COST	25,728	97,820
SENTINAL BALANCED FUND	AT COST	599,814	870,005

**TY 2016 Other Expenses Schedule****Name:** THE GEORGE T BAKER FOUNDATION INC**EIN:** 59-6151202**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK & BROKER'S FEES	3,802	3,802		0
MEALS	72	36		0
TRAVEL	699	350		0

## TY 2016 Other Income Schedule

**Name:** THE GEORGE T BAKER FOUNDATION INC

**EIN:** 59-6151202

### Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
OTHER INCOME	1,338	1,338	1,338

**TY 2016 Other Increases Schedule**

**Name:** THE GEORGE T BAKER FOUNDATION INC  
**EIN:** 59-6151202

Description	Amount
PRIOR PERIOD ADJUSTMENT	3,000



**TY 2016 Taxes Schedule****Name:** THE GEORGE T BAKER FOUNDATION INC**EIN:** 59-6151202

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
2016 ESTIMATED TAX PAYMENTS	360	0		0
2015 BALANCE DUE	322	0		0