**Return of Private Foundation** 

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

▶ 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.

For	calendar year 2016 or tax year beginning JUL	1, 2016	, and ending	JUN 30, 2017	
Nai	me of foundation			A Employer identification	number
	HE RENDER FAMILY FOUNDATION		1	26-1247676	
	nber and street (or P O box number if mail is not delivered to street a	address)	Room/suite	B Telephone number	2.0
	65 HERITAGE POINT DR	antal and a	<u> </u>	864-313-25	
	$_{ extstyle y}$ or town, state or province, country, and ZIP or foreign positive $_{ extstyle y}$ (ZIMPSONVILLE, SC $29681$	ostal code		C If exemption application is p	ending, check here
	Check all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	chack hare
<b>u</b> (	Final return	Amended return	ornier public charity	1. 1 oreign organizations	s, clicck liefe
	Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test,
H (	Check type of organization: X Section 501(c)(3) exi			E If private foundation sta	
		Other taxable private founda	ation	under section 507(b)(1)	
I Fa	air market value of all assets at end of year   J   Accountin	ng method: X Cash	Accrual	F If the foundation is in a (	60-month termination
(fi		ner (specify)	· · · ·	under section 507(b)(1)	
	\$ 1,226,975. (Part I, colur	mn (d) must be on cash i	basis)		T
Pá	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) )	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
		expenses per books	income	income	(cash basis only)
	1 Contributions, gifts, grants, etc., received			N/A	
	2 Check X If the foundation is not required to attach Sch B Interest on savings and temporary				
	3 cash investments 4 Dividends and interest from securities	16,438.	16,438.		STATEMENT 1
	5a Gross rents	10,430.	10,430.		PINIEWEWI I
	b Net rental income or (loss)				
•	6a Net gain or (loss) from sale of assets not on line 10	117,410.			
nue	b Gross sales price for all 122,918.	-		3**************************************	
)∜ <i>∤</i> Revenue	7 Capital gain net income (from Part IV, line 2)		117,410.	RE	CEIVED
20¦7 Rev	8 Net short-term capital gain			6	Sco
න	9 Income modifications Gross sales less returns			S AUG	28 2017
es.	10a and allowances				
AUG	Less Cost of goods sold			UG	DEN JT
¥	c Gross profit or (loss)  11 Other income				
Q	12 Total. Add lines 1 through 11	133,848.	133,848.		
CANNED	13 Compensation of officers, directors, trustees, etc	0.	0.		0.
Z	14 Other employee salaries and wages				
Ŭ.	15 Pension plans, employee benefits				
Se S	16a Legal fees	0			
Expense:	b Accounting fees STMT 2	2,625.	1,750.		875.
Ä	c Other professional fees STMT 3	2,517.	2,517.		0.
Administrative	17 Interest	4 206	0		0
stra	18 Taxes STMT 4	4,206.	0.		0.
į	19 Depreciation and depletion 20 Occupancy	·			<u> </u>
Adn	21 Travel, conferences, and meetings				
and	22 Printing and publications	<del></del>			
9	l P				
Operating	24 Total operating and administrative				
per	expenses. Add lines 13 through 23	9,348.	4,267.		875. 50,000.
0	25 Contributions, gifts, grants paid	50,000.			50,000.
	26 Total expenses and disbursements.	<b></b>			
	Add lines 24 and 25	59,348.	4,267.		50,875.
	27 Subtract line 26 from line 12:	74 500			
	A Excess of revenue over expenses and disbursements     A Not investment income (if posture extension)	74,500.	129,581.		
	b Net investment income (if negative, enter -0-)  c Adjusted net income (if negative, enter -0-)		147,301.	N/A	
	A Majagrea ner moome (n negative, enter -0-)			14/17	1

Fo	<u>rm 9</u>	90-PF (2016) THE RENDER FAMILY FOUNDS	TION	26-:	1247676 Page 2
	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
L	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	105,850.	82,348.	82,348.
	2	_ •			
	3	Accounts receivable ►			·
		Less; allowance for doubtful accounts			
	4	Pledges receivable			
	.	Less: allowance for doubtful accounts			
	5	Grants receivable		·	
	2	Receivables due from officers, directors, trustees, and other			<del></del>
	"				
	١,	disqualified persons			
	′	Other notes and loans receivable			
	١.	Less: allowance for doubtful accounts			
ets	8	Inventories for sale or use		<u></u>	
Assets	9	Prepaid expenses and deferred charges			
•		Investments - U.S. and state government obligations			
	t	Investments - corporate stock STMT 5	195,644.	289,786.	1,144,627.
	0	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 6	<3,860.>	0.	0.
	14	Land, buildings, and equipment: basis			<del>-</del>
		Less accumulated depreciation		1	
	15	Other assets (describe )			
		Total assets (to be completed by all filers - see the			
	'	instructions. Also, see page 1, item I)	297,634.	372,134.	1,226,975.
_	17	Accounts payable and accrued expenses	231,034.	3/2,134.	1,220,975.
	18	F			
		Grants payable			
Liabilities	19	Deferred revenue		<del></del>	
Ē	20	Loans from officers, directors, trustees, and other disqualified persons			
Lia	21	Mortgages and other notes payable			
	22	Other liabilities (describe )			
			_	_	
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
s		and complete lines 24 through 26 and lines 30 and 31.			
õ	24	Unrestricted	-,,		
lar	25	Temporarily restricted			
8	26	Permanently restricted	.,,,,		
Ę		Foundations that do not follow SFAS 117, check here			
or Fund Balances		and complete lines 27 through 31.			
S	27	Capital stock, trust principal, or current funds	0.	0.	
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	297,634.	372,134.	
Net Assets	30	Total net assets or fund balances	297,634.	372,134.	
_				0.272020	
	31	Total liabilities and net assets/fund balances	297,634.	372,134.	
P	art	III Analysis of Changes in Net Assets or Fund Ba	lances		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line 3	)		
		st agree with end-of-year figure reported on prior year's return)		1	297,634.
2		r amount from Part I, line 27a		2	74,500.
		r increases not included in line 2 (itemize)		3	74,500.
		lines 1, 2, and 3		4	372,134.
		eases not included in line 2 (itemize)		5	<u> </u>

Form **990-PF** (2016)

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

623511 11-23-16

8 Enter qualifying distributions from Part XII, line 4

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.

Enter 1% of net investment income (1% of Part I, line 27b)

Form **990-PF** (2016)

1,296.

59,57<u>1.</u>

50,875.

See the Part VI instructions.

7 Add lines 5 and 6

623521 11-23-16

6

7

Form 99	00-PF (2016) THE RENDER FAMILY FOUNDATION VI   Excise Tax Based on Investment Income (Section 494)	Ю(a), 4	940(b), 4	940(e), or 4	26- <b>948</b> -	12476 see ins	76 struc		age 4 S)
1a Ex	empt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and e	enter "N/A	on line 1.	ì					
	ite of ruling or determination letter: (attach copy of letter if ne								
<b>b</b> Do	omestic foundations that meet the section 4940(e) requirements in Part V, check here		and enter 1%	<b>)</b>	1		2	<u>, 59</u>	92.
	Part I, line 27b								
	other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 49			. (b) J					_
	x under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. C	others en	er -0-)		2				<u>0.</u>
	Id lines 1 and 2				3		2	, 59	
	ubtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. (	Others en	ter -U-)		4			Ē	0.
	x based on investment income Subtract line 4 from line 3. If zero or less, enter -0-				5			, 53	92.
	edits/Payments: I16 estimated tax payments and 2015 overpayment credited to 2016	ا مو ا		2,640.					
	empt foreign organizations - tax withheld at source	6a 6b		2,040.					
	x paid with application for extension of time to file (Form 8868)	6c							
	ckup withholding erroneously withheld	6d							
	otal credits and payments. Add lines 6a through 6d	<u> </u>			7		2	- 64	10.
	ter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is atta	ached			8			<i>,</i> .	
	x due. If the total of lines 5 and 8 is more than line 7, enter amount owed			•	9				
	rerpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				10			- 4	18.
	ter the amount of line 10 to be; Credited to 2017 estimated tax		48.	Refunded	11				0.
Part	VII-A Statements Regarding Activities								
<b>1a</b> Du	iring the tax year, did the foundation attempt to influence any national, state, or local legi-	slation or	did it partici	ate or intervene	ın		Υ	es	No
an	y political campaign?						1a		X
<b>b</b> Dı	d it spend more than \$100 during the year (either directly or indirectly) for political purpo	ses (see	instructions	for the definition	)?		1b		<u>X</u>
lf	the answer is "Yes" to 1 $m{a}$ or 1 $m{b}$ , attach a detailed description of the activities a	and cop	es of any m	aterials publist	ned or			- 1	
di	stributed by the foundation in connection with the activities.								
<b>c</b> Dı	d the foundation file Form 1120-POL for this year?				•	-	1c		<u>X</u>
	ter the amount (if any) of tax on political expenditures (section 4955) imposed during th	-						Ì	
	On the foundation. > \$0 (2) On foundation manager								
	ter the reimbursement (if any) paid by the foundation during the year for political expend	liture tax	imposed on	foundation					
	anagers. ► \$						_		
	is the foundation engaged in any activities that have not previously been reported to the	RS2				-	2	$\dashv$	<u>X</u>
	"Yes," attach a detailed description of the activities								
	is the foundation made any changes, not previously reported to the IRS, in its governing laws, or other similar instruments? If "Yes," attach a conformed copy of the change		ni, articles o	incorporation, c	) í		,	- 1	v
	d the foundation have unrelated business gross income of \$1,000 or more during the year					-	3 4a	+	$\frac{\mathbf{x}}{\mathbf{x}}$
	Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	ui :			N	,_ <u> </u>	4b	+	
	as there a liquidation, termination, dissolution, or substantial contraction during the year	?				′ <b>~</b> ⊢	5	$\dashv$	X
	"Yes," attach the statement required by General Instruction T					-			<del></del>
	e the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	uther:				İ			
	By language in the governing instrument, or								
•	By state legislation that effectively amends the governing instrument so that no mandato	ry directi	ons that conf	lict with the state	law				
rei	main in the governing instrument?						6   3	X	
<b>7</b> Di	d the foundation have at least \$5,000 in assets at any time during the year? If "Yes," col	mplete F	Part II, col. (	c), and Part XV	,			X	
						İ			
	ter the states to which the foundation reports or with which it is registered (see instruction	ons) ► į							
	<u>/A</u>		·····						
	he answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	Attorney (	General (or d	esignate)					
	each state as required by General Instruction G? If "No," attach explanation						3b   3	X	
	the foundation claiming status as a private operating foundation within the meaning of se			942(j)(5) for cale	ndar				
	ar 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," of	•					9	_	<u>X</u>
10 Di	d any persons become substantial contributors during the tax year? If "Yes," attach a sched	ule listing t	heir names and	addresses			10		<u>X</u>
						Form	990-l	7 <b>6</b> (2	ZU16)

P	art VII-A Statements Regarding Activities (continued)		_	
	•		Yes	No
11	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)	11		_X_
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12_		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► THE FOUNDATION Telephone no. ►864-3	<u> 13-2</u>	536	
	Located at ► 365 HERITAGE POINT DR, SIMPSONVILLE, SC ZIP+4 ►2	<u>9681</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	L	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
Б	foreign country	<u> </u>		
P	art 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.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?  Yes X No	-		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X 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)?  Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after		Ì	
	termination of government service, if terminating within 90 days.)  Yes X No	1		
U	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	١		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?  N/A  Orangizations relying an a current notice regarding disaster assistance (see instructions)?	_1b_		
	Organizations relying on a current notice regarding disaster assistance check here  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?			X
9	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1c	-	
_	defined in section 4942(j)(3) or 4942(j)(5)):	1		
a	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2016?  Yes X No			
	If "Yes," list the years ▶			
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 all years listed, answer "No" and attach			
	statement - see instructions.)  N/A	2b		
C	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.	<del></del>	· · · · ·	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	1		
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.)  N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		<u> </u>
		rm 990	)_DE	

orm 990-PF (2016) THE RENDER FAMILY FOUNDS			<u> 26-12476</u>	<u> 576</u>	Page 6
Part VII-B   Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					T
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es X No	ļ	
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indir	ectly,		ļ	
any voter registration drive?		Y	es X No	l	
(3) Provide a grant to an individual for travel, study, or other similar purposes	3?	Y	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					
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				
the prevention of cruelty to children or animals?	,		es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described				
section 53.4945 or in a current notice regarding disaster assistance (see instri		riogolaciono	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check l	•			<del></del>	<del></del>
c If the answer is 'Yes' to question 5a(4), does the foundation claim exemption to		ained			
expenditure responsibility for the grant?		- /	es 🔲 No		
If "Yes," attach the statement required by Regulations section 53 494		1/A	* NU		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	, ,				
a personal benefit contract?	pay premiums on		es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	ooroonal barafit aantuurt	re	8 LAL NO	<b>CL</b>	
If "Yes" to 6b, file Form 8870.	Dersonal Denetit Contract?		F	6b	<u> </u>
ŕ	-h-lht		<b>□</b>		
7a At any time during the tax year, was the foundation a party to a prohibited tax		Y6	es X No	<del></del> +-	
b If "Yes," did the foundation receive any proceeds or have any net income attrib  Part VIII Information About Officers, Directors, Trust			N/A	7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, roundation Ma	anagers, nigni	y		
List all officers, directors, trustees, foundation managers and their	compensation				<del></del>
and the managers and their	<del></del>	(c) Compensation	(d) Contributions to	1 (0)	Evnanca
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	acco	Expense ount, other
	to position	enter -0-)	compensation	allo	owances
	-			i	
TOTAL COMPANY TO THE STATE OF T	1				_
SEE STATEMENT 7		0.	0.	<u>,  </u>	0.
				1	
	1				
· · · · · · · · · · · · · · · · · · ·					
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1). If none,	enter "NONE."	C-2		
(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	(e)	Expense unt, other
(a) Name and address of each employee paid more than \$50,000	devoted to position	(C) Compensation	and deferred compensation	1 4000	owances
NONE					
				İ	
				1	
	1				
	1				
				1	
	1				
	<del> </del>			+	
otal number of other employees paid over \$50,000	<del></del>	1		Ь	0
Case in the complete of paid over the property				000 5	<b>PF</b> (2016)
			rorm	, ップリート	· r (2016)

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	idations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	1,079,811.
þ	Average of monthly cash balances	1b	140,761.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,220,572.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,220,572.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	18,309.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,202,263.
6	Minimum investment return Enter 5% of line 5	6	60,113.
P	<b>art XI</b> Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here  and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	60,113.
2a	Tax on investment income for 2016 from Part VI, line 5 2,592.		
b	Income tax for 2016. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	2,592.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	57,521.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	57,521.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	57,521.
P	art XII Qualifying Distributions (see Instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	50,875.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	50,875.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	50,875.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies fo	or the section
	4040(a) radiustion of tay in these years		

Form **990-PF** (2016)

## Part XIII Undistributed Income (see instructions)

	•	(a) Corpus	(b) Years prior to 2015	(c) 2015	( <b>d</b> ) 2016
1	Distributable amount for 2016 from Part XI,				
	line 7		<del></del>		57,521.
	Undistributed income, if any, as of the end of 2016				
	a Enter amount for 2015 only			0.	
	b Total for prior years:		•		
•	Excess distributions carryover, if any, to 2016:		0.		
	a From 2011				
	b From 2012				
	c From 2013				
	d From 2014				
	e From 2015 4, 296.				
	f Total of lines 3a through e	4,296.			
	Qualifying distributions for 2016 from	4,200.			
•	Part XII, line 4: ► \$ 50,875.				
	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.			
(	d Applied to 2016 distributable amount				50,875.
	e Remaining amount distributed out of corpus	0.			
5	Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	4,296.			4,296.
6	Enter the net total of each column as indicated below:				
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
	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  d Subtract line 6c from line 6b. Taxable		0.		
	amount - see instructions	,	0.		
	e Undistributed income for 2015. Subtract line				
	4a from line 2a. Taxable amount - see instr.			0.	
1	f Undistributed income for 2016. Subtract			0.	
•	lines 4d and 5 from line 1. This amount must			!	
	be distributed in 2017				2,350.
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election				
	may be required - see instructions)	0.			 
8	Excess distributions carryover from 2011				
	not applied on line 5 or line 7	0.			
9	Excess distributions carryover to 2017.				
	Subtract lines 7 and 8 from line 6a	0.			
	Analysis of line 9:		ļ		l
	Excess from 2012				l
	Excess from 2013				
	Excess from 2014				
	Excess from 2015				
	Excess from 2016				

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Yo	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	**	
a Paid during the year				
AMERICAN HEART ASSOCIATION / AMERICAN STROKE ASSOCIATION 4217 PARK PLACE CT	N/A	PUBLIC	2,500 GENERAL PURPOSE OF CHARITY 1,000 MEMORY OF CONOR	
GLEN ALLEN, VA 23060			BOUVERON	3,500.
BISHOP O'CONNELL HIGH SCHOOL 6600 LITTLE FALLS ROAD ARLINGTON, VA 22213	N/A	PUBLIC	BISHOP O'CONNELL KNIGHT FUND	500,
BRITEPATHS 4080 CHAIN BRIDGE ROAD 2ND FL FAIRFAX, VA 22030	N/A	PUBLIC	500 TO MARSHALL ROAD FOOD 4 THOUGHT 500 TO GENERAL PURPOSE OF CHARITY	1,000.
CATHOLIC CHARITIES OF THE DIOCESE OF ARLINGTON 200 N GLEBE RD #506	N/A	PUBLIC	GENERAL PURPOSE OF CHARITY	
CHILDREN'S DIABETES FOUNDATION 4380 S SYRACUSE ST #430 DENVER CO 80237	N/A	PUBLIC	GENERAL PURPOSE OF CHARITY	1,000,
	TINUATION SHEE	T(S)	▶ 3a	50 000
b Approved for future payment  NONE				
Total			<b>▶</b> 3b	0.

er gross amounts unless otherwise indicated.	Unrelated I	usiness income		y section 512, 513, or 514	(e)
gross amounts unless otherwise moleated.		(b)	(c) Exclu-	(d)	Related or exempt
	(a) Business code	Amount	sion	Amount	function income
rogram service revenue:	Code			<del></del>	
	_				
	- <del>  -</del>				
	_				
	_				
	_				<del></del>
Fees and contracts from government agencies			_  _		
lembership dues and assessments					
nterest on savings and temporary cash					
nvestments					· · · · · · · · · · · · · · · · · · ·
Dividends and interest from securities			14	16,438.	
let rental income or (loss) from real estate:					_
Debt-financed property					
Not debt-financed property					
let rental income or (loss) from personal		· · · · · · · · · · · · · · · · · · ·	, · · · · · · · · · · · · · · · · · · ·		
• • •					
roperty	<del>                                     </del>		<del>                                     </del>		<u> </u>
Other Investment Income			<del>                                     </del>		<del></del>
Gain or (loss) from sales of assets other			1 1 0	117 410	
han inventory	<u> </u>	<del></del>	19	117,410.	<del></del>
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:			1		
a	_				
			1 1	1	
b	_				
D	_				
c	_				
d	_		0.	133,848.	
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e)			).	133,848.	133,8
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  Eworksheet in line 13 instructions to verify calculations  THE Relationship of Activitie	s to the Accor	nplishment of	Exempt P	urposes	133,8
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations	s to the Accor	nplishment of	Exempt P	urposes	
subtotal. Add columns (b), (d), and (e)  fotal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations  Int XVI-B  Relationship of Activitie  e No.  Explain below how each activity for which is	s to the Accor	nplishment of	Exempt P	urposes	
subtotal. Add columns (b), (d), and (e)  fotal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations  Int XVI-B  Relationship of Activitie  e No.  Explain below how each activity for which is	s to the Accor	nplishment of	Exempt P	urposes	
ubtotal. Add columns (b), (d), and (e)  otal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations  irt XVI-B Relationship of Activitie  e No. Explain below how each activity for which is	s to the Accor	nplishment of	Exempt P	urposes	
ubtotal. Add columns (b), (d), and (e)  otal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations  int XVI-B Relationship of Activitie  e No. Explain below how each activity for which is	s to the Accor	nplishment of	Exempt P	urposes	
subtotal. Add columns (b), (d), and (e)  fotal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations  Int XVI-B  Relationship of Activitie  e No.  Explain below how each activity for which is	s to the Accor	nplishment of	Exempt P	urposes	
subtotal. Add columns (b), (d), and (e)  fotal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations  Int XVI-B  Relationship of Activitie  e No.  Explain below how each activity for which is	s to the Accor	nplishment of	Exempt P	urposes	
subtotal. Add columns (b), (d), and (e)  fotal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations  art XVI-B  Relationship of Activitie  e No.  Explain below how each activity for which is	s to the Accor	nplishment of	Exempt P	urposes	
subtotal. Add columns (b), (d), and (e)  fotal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations  Int XVI-B  Relationship of Activitie  e No.  Explain below how each activity for which is	s to the Accor	nplishment of	Exempt P	urposes	
subtotal. Add columns (b), (d), and (e)  fotal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations  art XVI-B  Relationship of Activitie  e No.  Explain below how each activity for which is	s to the Accor	nplishment of	Exempt P	urposes	
subtotal. Add columns (b), (d), and (e)  fotal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations  Int XVI-B  Relationship of Activitie  e No.  Explain below how each activity for which is	s to the Accor	nplishment of	Exempt P	urposes	
subtotal. Add columns (b), (d), and (e)  fotal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations  art XVI-B  Relationship of Activitie  e No.  Explain below how each activity for which is	s to the Accor	nplishment of	Exempt P	urposes	
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  Worksheet in line 13 instructions to verify calculations  THE TOTAL RELATIONSHIP OF ACTIVITIES  END. Explain below how each activity for which is	s to the Accor	nplishment of	Exempt P	urposes	
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  Worksheet in line 13 instructions to verify calculations  THE TOTAL RELATIONSHIP OF ACTIVITIES  END. Explain below how each activity for which is	s to the Accor	nplishment of	Exempt P	urposes	
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  Worksheet in line 13 instructions to verify calculations  The results of the column	s to the Accor	nplishment of	Exempt P	urposes	
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  Worksheet in line 13 instructions to verify calculations  THE TOTAL RELATIONSHIP OF ACTIVITIES  END. Explain below how each activity for which is	s to the Accor	nplishment of	Exempt P	urposes	
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  Worksheet in line 13 instructions to verify calculations  The results of the column	s to the Accor	nplishment of	Exempt P	urposes	
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  Worksheet in line 13 instructions to verify calculations  THE TOTAL RELATIONSHIP OF ACTIVITIES  END. Explain below how each activity for which is	s to the Accor	nplishment of	Exempt P	urposes	
subtotal. Add columns (b), (d), and (e)  fotal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations  Int XVI-B  Relationship of Activitie  e No.  Explain below how each activity for which is	s to the Accor	nplishment of	Exempt P	urposes	

623621 11-23-16

Here Signature of officer or trustee

Sign

Paid

**Preparer** 

**Use Only** 

Print/Type preparer's name

Firm's name ► MURRAY,

Title Date

May the IRS discuss this return with the preparer shown below (see instr )? X Yes

Date Preparer's signature 08/07/17 ANDREW YOUHAS

and belief, it is true, correct, and complete. Declaration of preparer (other than taxpaver) is based on all information of which preparer has any knowledge

Check ıf self- employed

P00177689 P Firm's EIN ► 54-1032507

Firm's address ▶ 6402 ARLINGTON BLVD., SUITE 1130 FALLS CHURCH, VA 22042-2333

JONSON,

Phone no. 703-237-2500

Form **990-PF** (2016)

LTD.,

Oupitul dama and Los	SSCS IOF TAX OF INVESTIGENT INCOME				
(a) List and	describe the kind(s) of property solo	i, e.g., real estate,	(b) How acquired	(c) Date acquired (mo., day, yr.)	(d) Date sold
	ick warehouse; or common stock, 20	00 shs. MLC Co.	D - Donation	(mo., day, yr.)	(mo., day, yr.)
1a 1,000 SHS VULC				VARIOUS	08/24/16
b 5 MARCH 2017 C	ALLS VULCAN MATE	RIALS 140 (EXPIRE			01/25/17
	LS VULCAN MATERIA	<u>ALS 145 (EXPIRED)</u>	P	05/22/17	01/25/17
d CAPITAL GAINS	DIVIDENDS				
<u>e</u>					
f				<del> </del>	<u> </u>
<u>g</u> h					
_ <del>'''                                  </del>		• •		<del> </del>	
1					
k					
1					
<u>m</u>	· · · · · · · · · · · · · · · · · · ·				
<u>n</u>					
0					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(e) t (p	) Gain or (loss) plus (f) minus (g)	
a 118,752.		5,508.			113,244.
b 1,520.					1,520.
<u>c</u> 2,050.			· <del>-</del> · · · · · · · · · · · · · · · · · · ·		2,050.
d 596.					596.
<u>e</u>					
f					
g h			<del></del>		·
1		-			
1			·		·
k					
<u> </u>					
m					
n					
Complete only for secretary because		h- (			
Complete only for assets snowin	g gain in column (h) and owned by t			sses (from col. (h)) of col. (h) gain ovei	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (ı) over col. (j), ıf any	but n	ot less than "-0-")	coi. (k),
a		010. 00. (j); ii 2.iij			113,244.
b					$\frac{113,244}{1,520}$
C					2,050.
d					596.
е					
f					
g					
<u>h</u>			-		
1					
<u> </u>		-			
k I				<del></del>	-
m		·			
n	-	****			···-
0					
		in Dort I line 7		·	
2 Capital gain net income or (net cap	11 (1000); 01101 0	_ 1	2	<u> </u>	117,410.
3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, of (loss), enter "-0-" in Part I, line 8	column (c).	J (6):	2	NT / A	

THE RENDER FAMILY FOUNDATION

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 CHILDREN'S HOSPITAL FOUNDATION N/A PUBLIC PEDIATRIC CANCER 810 ROEDER ROAD #300 RESEARCH 1,000. SILVER SPRING, MD 20910 CROHN'S AND COLITIS FOUNDATION N/A PUBLIC 3,000 RESEARCH PO BOX 1245 2,000 GENERAL PURPOSE ALBERT LEA, MN 56007 OF CHARITY 5,000. FISHER HOUSE FOUNDATION, INC. N/A PUBLIC GENERAL PURPOSE OF 111 ROCKVILLE PIKE #420 CHARITY 2,000. ROCKVILLE, MD 20850 GREENVILLE HUMANE SOCIETY N/A PUBLIC GENERAL PURPOSE OF CHARITY 305 AIRPORT ROAD 2,000. GREENVILLE, SC 29607 PUBLIC CONNECT LAKE GREENWOOD GREENWOOD COMMUNITY IMPROVEMENT N/A FOUNDATION (GCIF) P.O. BOX 980 GREENWOOD, SC 29648 500. RESEARCH IMPROVE CARE NOW N/A PUBLIC N213 GIVEN COURTYARD BURLINGTON, VT 05405 3,000. INOVA HEALTH FOUNDATION N/A PUBLIC INOVA CHILDREN'S 8110 GATEHOUSE ROAD STE 200 HOSPITAL FALLS CHURCH VA 22042 1,000. JOHNS HOPKINS CHILDREN'S CENTER N/A PUBLIC ALLERGY RESEARCH 750 E. PRATT STREET #1700 1,000. BALTIMORE MD 21202 JOURNEY 4 A CURE N/A PUBLIC GENERAL PURPOSE OF 43300-116 SOUTHERN WALK PLAZA #649 CHARITY 1,000. BROADLANDS, VA 20148 OUR LADY OF GOOD COUNSEL CATHOLIC N/A PUBLIC BISHOP'S LENTEN APPEAL CHURCH 8601 WOLFTRAP RD SE 500. VIENNA VA 22182 Total from continuation sheets 43 500.

THE RENDER FAMILY FOUNDATION 26-1247676

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y				·
. Recipient	If recipient is an individual,			
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		<del> </del>
WARIAN CANCER RESEARCH FUND ALLIANCE	N/A	PUBLIC	GENERAL PURPOSE OF	
O BOX 32141			CHARITY	
EW YORK, NY 10087				1,000
SAFE HARBOR RESALE STORE	N/A	PUBLIC	GENERAL PURPOSE OF	
PO BOX 174			CHARITY	2 000
GREENVILLE, SC 29602		<del>                                     </del>		
SCLERODERMA FOUNDATION	N/A	PUBLIC	GENERAL PURPOSE OF	
300 ROSEWOOD DRIVE STE 105	N/A	TOBBIC	CHARITY	
DANVERS MA 01923				2,000
SPECIAL OLYMPICS OF VIRGINIA	N/A	PUBLIC	GENERAL PURPOSE OF	
3212 SKIPWITH ROAD STE 100			CHARITY	
RICHMOND, VA 23294				500
ST. JUDE CHILDREN'S RESEARCH HOSPITAL	N/A	PUBLIC	GENERAL PURPOSE OF	
501 ST JUDE PLACE			CHARITY	
MEMPHIS, TN 38105			<del></del>	_5_500
UNC CHAPEL HILL	N/A	PUBLIC	1,000 TO WOMEN'S	
PO BOX 309			SOFTBALL 1,000 TO COLLEGE OF	
CHAPEL HILL, NC 27514			ARTS AND SCIENCES	
			1,000 TO KENAN FLAGLER	4,000
UNIV OF SOUTH CAROLINA	N/A	PUBLIC	COLLEGE OF ENGINEERING	
1027 BARNWELL STREET			& COMPUTING -	
COLUMBIA, SC 29208			MECHANICAL ENGINEERING	
			- THE COMPLETE STUDENT	
			EXPERIENCE (CLASSROOM	2,000
VIDGINARI VINDI COLVIDIONI	7/3	DIE IC	GENERAL PURPOSE OF	
UPSTATE WARRIOR SOLUTION 3 CALEDON CT SUITE A-2	N/A	PUBLIC	CHARITY	
GREENVILLE, SC 29615				1,500
VA TECH FOUNDATION, INC.	N/A	PUBLIC	GENERAL PURPOSE OF	
902 PRICES FORK RD STE 4500			CHARITY	
BLACKSBURG, VA 24061				1,500
VA TECH UNIVERSITY DEVELOPMENT	N/A	PUBLIC	ENGINEERING PROGRAM	
902 PRICES FORK RD STE 4500 BLACKSBURG, VA 24061				1,000
Total from continuation sheets				

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient 1,500 WOUNDED WARRIOR WOUNDED WARRIOR PROJECT N/A PUBLIC PROJECT PO BOX 758516 1,000 GENERAL PURPOSE TOPEKA, KS 66675 2,500, OF CHARITY GENERAL PURPOSE OF YELLOW RIBBON FUND, INC. N/A PUBLIC 4905 DEL RAY AVE #500 CHARITY 3,000. BETHESDA, MD 20814 Total from continuation sheets

THE RENDER FAMILY FOUNDATION	<u> 26-1247676</u>
Part XV Supplementary Information	
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution	
NAME OF RECIPIENT - UNC CHAPEL HILL	
1,000 TO WOMEN'S SOFTBALL	
1,000 TO COLLEGE OF ARTS AND SCIENCES	<del> </del>
1,000 TO KENAN FLAGLER BUSINESS SCHOOL ANNUAL FUND	
1,000 TO CHILDRENS PROGRAM FUND FOR NC CHILDREN'S HOSE	PITAL
NAME OF RECIPIENT - UNIV OF SOUTH CAROLINA	
COLLEGE OF ENGINEERING & COMPUTING - MECHANICAL ENGINE	EERING - THE
COMPLETE STUDENT EXPERIENCE (CLASSROOM UPGRADES)	
	•
	<u> </u>
	· · · · · · · · · · · · · · · · · · ·

FORM 990-PF . DIV	IDENDS	AND INTER	EST	FROM SECUR	ITIES ST	ATEMENT	1
	OSS OUNT	CAPITAL GAINS DIVIDEND		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTI NET INCO	
DIVIDENDS - UBS 1'	7,021.	59	6.	16,425.	16,425.		
BANK	13.		0.	13.	13.		
TO PART I, LINE 4	7,034.	59	6.	16,438.	16,438.		
FORM 990-PF		ACCOUNTI	NG 1	FEES	Si	ATEMENT	2
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
TAX PREP		2,625.		1,750.		87	75.
TO FORM 990-PF, PG 1, LN	16B	2,625.		1,750.		87	75.
FORM 990-PF	OT	HER PROFES	SIO	NAL FEES	Sī	ATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
INVESTMENT EXPENSE		2,517.		2,517.			0.
TO FORM 990-PF, PG 1, LN	16C	2,517.		2,517.			0.
FORM 990-PF		TAX	ES		ST	'ATEMENT	4
DESCRIPTION				(B) TINVEST- NT INCOME	(C) ADJUSTED NET INCOME		
FEDERAL EXCISE TAX - PRIC	OR	1,566.		0.			0.
FEDERAL EXCISE TAX - CURRENT YR ESTIMATE		2,640.		0.			0.
TO FORM 990-PF, PG 1, LN	18	4,206.		0.	· <del>····</del>		0.
	==				<del></del>	<del></del>	

FORM 990-PF .	CORPORATE STOCK		STATEMENT 5		
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE		
7,200 SHS VULCAN MATERIALS CO	-	0.	0.		
6,200 SHS VULCAN MATERIALS CO		34,150.			
1,925 SHS FRP HOLDINGS		2,390.	88,839.		
641 SHS PATRIOT TRANSPORTATION	HOLDINGS INC	-,			
(NEW)		593.	11,455.		
1,265.154 SHS ANGEL OAK MULTI-S	TRATEGY INCOME	•			
FUND		0.	0.		
2,158.213 SHS ANGEL OAK MULTI-S	TRATEGY INCOME				
FUND		24,001.	24,366.		
1,992.201 SHS API EFF FRONT INC		0.	0.		
2,950.120 SHS YORKTOWN MULTIASS		30,001.	32,068.		
1,032.551 SHS COHEN STEERS PREF		0.	0.		
1,761.998 SHS COHEN STEERS PREF		24,001.	24,968. 0.		
2,186.230 SHS OPPENHEIMER STEEL		0.			
3,240.322 SHS OPPENHEIMER STEEL		30,001.	29,779.		
595 SHS OPPENHEIMER ULTRA DIVID		19,650.	20,141.		
1,098.212 SHS PIMCO INCOME FUND 1,930.510 SHS PIMCO INCOME FUND		0.	0.		
2,472.226 SHS VANGUARD HIGH YIE		22,999. 0.	23,8 <b>4</b> 2.		
- <del>-</del>	ELD CORP FUND	24,001.	24,916.		
	.464 SHS VANGUARD WELLESLEY INCOME FUND				
884.227 SHS VANGUARD WELLESLEY	0. 55,000.	0. 56,237.			
2,674.596 SHS VOYA GNMA INCOME	22,999.	22,600.			
1,504.516 SHS VOYA GNMA INCOME		0.	0.		
TOTAL TO FORM 990-PF, PART II,	LINE 10B	289,786.	1,144,627.		
FORM 990-PF	OTHER INVESTMENTS		STATEMENT 6		
	OTHER INVESTMENTS	<del></del>	STATEMENT 0		
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE		
-10 VULCAN MATERIALS CO AUG16 1	15 COST				
CALLS (SHORT)		0.	0.		
TOTAL TO FORM 990-PF, PART II,	LINE 13	0.	0.		

	_		EXPENSE ACCOUNT	
CO-TRUSTEE 1.00	0.	0.		
CO-TRUSTEE 1.00	0.	0.	0	
CO-TRUSTEE 1.00	0.	0.	0	
CO-TRUSTEE 1.00	0.	0.	0	
CO-TRUSTEE 1.00	0.	0.	0	
CO-TRUSTEE 1.00	0.	0.	0	
E 6, PART VIII	0.	0.	0	
	AVRG HRS/WK  CO-TRUSTEE 1.00  CO-TRUSTEE 1.00  CO-TRUSTEE 1.00  CO-TRUSTEE 1.00  CO-TRUSTEE 1.00	AVRG HRS/WK SATION  CO-TRUSTEE	TITLE AND AVRG HRS/WK SATION CONTRIB  CO-TRUSTEE 1.00 0. 0.  CO-TRUSTEE 1.00 0. 0.  CO-TRUSTEE 1.00 0. 0.  CO-TRUSTEE 1.00 0. 0.  CO-TRUSTEE 1.00 0. 0.  CO-TRUSTEE 1.00 0. 0.  CO-TRUSTEE 1.00 0. 0.  CO-TRUSTEE 1.00 0. 0.	

NAME OF MANAGER

CLARRON E. RENDER, JR. JUDITH T. RENDER