Form **990** (2016)

Form 990 (2016	WALTON ELECTRI	C TRUST, INC.	58-2351746	;	Page 2
Part III	_	ervice Accomplishments			
1 Briefly de	Check if Schedule O confiscribe the organization's mission	ains a response or note to	any line in this Part III		
THE PU			ATE AND DISBURSE EMC.	FUNDS FOR	CHARITABLE
2 Did the a					
prior Form	rganization undertake any signific n 990 or 990-EZ? describe these new services on S		ear which were not listed on the		Yes X No
services?	rganization cease conducting, or i o describe these changes on Sched		conducts, any program		Yes X No
4 Describe expenses	the organization's program service	e accomplishments for each of its organizations are required to repo	three largest program services, a port the amount of grants and allocated	-	
			ATE AND DISBURSE		CHARITABLE
4b (Code) (Expenses \$	including gran	its of \$) (Revenue \$	
4c (Code) (Expenses \$	ıncludıng gran	ts of \$) (Revenue \$)
4d Other prog	gram services (Describe in Sched	ule O) including grants of \$) (Revenue \$_		,
	ram service expenses	1,320,727) (ivevenue φ		
)AA					Form 990 (2016)

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	_1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	_3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			37
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		<u>X</u> _
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,		.	
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
•	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		<u> </u>
0	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		<u> </u>
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		1	
	VII, VIII, IX, or X as applicable		=	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			37
	complete Schedule D, Part VI	_11a		<u>X</u>
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	441		x
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	110	[x
d	of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	11c	-+	
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b				
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		_ <u>X</u> _
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,		ļ	
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	[v
_	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	40	Ī	₩
_	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	-+	<u> </u>
1	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	4.7	1	x
0	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	-"	-+	 -
-	If "Yes," complete Schedule G, Part III	19		x

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Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
_	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)		- 1	1
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	1	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
-	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
-	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
-	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-37 If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
-	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
-	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		$\neg \uparrow$	
-•	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37	1	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
-	19? Note . All Form 990 filers are required to complete Schedule O	38	x	
_				

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Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1Ь Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2h Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? X 4a If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? X 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7с If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? h 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a а Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter Gross income from members or shareholders а 11a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13c c Enter the amount of reserves on hand X 14a 14a Did the organization receive any payments for indoor tanning services during the tax year? 14b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

۳٤	Governance, Management, and Disclosure For each "Yes" response to lines 2 through					
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in S	ched	ıle O See i	nstruc	tions	(T
800	Check if Schedule O contains a response or note to any line in this Part VI					X
Sec	ction A. Governing Body and Management					·
1.	Enter the number of voting members of the neverting hady at the and of the towns	المه	15		Yes	No
1a	, · · · · · · · · · · · · · · · · · · ·	1a		1		
	If there are material differences in voting rights among members of the governing body, or	1				
	if the governing body delegated broad authority to an executive committee or similar	1				-
h	committee, explain in Schedule O	4.	15			
ь 2	Enter the number of voting members included in line 1a, above, who are independent	1b				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with					X
3	any other officer, director, trustee, or key employee?			2_		
J	Did the organization delegate control over management duties customarily performed by or under the direct					x
4	supervision of officers, directors, or trustees, or key employees to a management company or other person?			3		X
5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4		X
6	Did the organization become aware during the year of a significant diversion of the organization's assets?			5		X
	Did the organization have members or stockholders?			6		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint]		X
L	one or more members of the governing body?			7a		
b	, 0			71.		X
	stockholders, or persons other than the governing body?			7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by	ine to	lowing		x	
a	The governing body?			8a_		X
ь 9	Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			8b		
3						x
206	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O tion B. Policies (This Section B requests information about policies not required by the Interna-	V Po	vonuo Co	9		
56 0	ction B. Folicies (This Section B requests information about policies not required by the interna-	11 176	venue co	Je j	Yes	No
l0a	Did the organization have local chapters, branches, or affiliates?			10a	res	No X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			IUa		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
12	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the fi	rm2		11a	х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	,,,,,,		112	-	
2a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>			12a	x	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to co	nflicte	.2	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	Ji iiii Ct	•	125		
·	describe in Schedule O how this was done			12c	x	
3	Did the organization have a written whistleblower policy?			13	X	
4	Did the organization have a written document retention and destruction policy?			14	X	
5	Did the process for determining compensation of the following persons include a review and approval by					
•	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				1	
а	The organization's CEO, Executive Director, or top management official			15a	ł	x
b	Other officers or key employees of the organization			15b		X
~	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)					
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement				- 1	
	with a taxable entity during the year?			16a]	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			1		
_	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the				1	
	organization's exempt status with respect to such arrangements?			16b	1	
Sec	tion C. Disclosure]		
7	List the states with which a copy of this Form 990 is required to be filed ▶ GA					
8	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s anl	v)			
-	available for public inspection. Indicate how you made these available. Check all that apply	, 111	· ·			
	Own website Another's website X Upon request Other (explain in Schedule O)					
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest po	ICV. ar	nd			
-	financial statements available to the public during the tax year	,				
0	State the name, address, and telephone number of the person who possesses the organization's books and records					
	ALTON ELECTRIC TRUST, INC. P.O. BOX 260					
	DIROE GA 30655	1	770	-26	7-2	505

Part VII. Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any	bo of	x, uni ficer a	Pos check ess pe	rson	than o is both or/truste	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) JOHN HALL										
	2.00									
DIRECTOR	0.00	X	L_	<u> </u>		<u> </u>		0	0	0
(2) BRENDA BROWN										
	2.00	1				1				
TREASURER	0.00	X		X			_	0	0	0
(3) DAVID WILLIAMS										
	2.00								_	
DIRECTOR	0.00	X				ļ		0	0	0
(4) NANCY ABBOTT		i							į	
	2.00				•				_	_
DIRECTOR	0.00	X		L		$oxed{oxed}$		0	0	0
(5) SYLVIA BYRD				ĺ	İ					
	2.00	1							_	_
DIRECTOR	0.00	X						0	0	0
(6) WILLIAM FELDKAMP					}					
	2.00						1			_
SECRETARY	0.00	X		X				0	0	0
(7) DAVID FOY										
	2.00									
DIRECTOR	0.00	X						0	0	0
(8) KEN GRAFF						1 1				
	2.00									
CHAIRMAN	0.00	X		X				0	0	0
(9) DON HARDISON						l i				
	2.00					{ }				
DIRECTOR	0.00	X						0	0	0
(10) RITA KNUDSEN										
	2.00									
DIRECTOR	0.00	X				L		0	0	0
(11) DEEDRA LEACH										
	2.00									_
DIRECTOR	0.00	X						0	0	0
DAA										Form 990 (2016)

Part VII. Section A. Officers	s, Directors, Tru	Stee	S, N	ey E	прк	yees	s, an	id Highest Compensated	Employees (continued)				
(A) Name and title	(B) Average hours per week (list any	bo	x, uni	Pos check ess pe	erson	than o is both or/truste	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations		(F) Estima amoun othe compens	ited it of ir sation	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)		from ti organiza and rela organiza	ation ated	
(12) ELBERT RIVERS		\vdash			-	-	<u> </u>						
	2.00												
DIRECTOR	0.00	X	<u> </u>	ļ	<u> </u>			0	0	<u> </u>			0
(13) SANDRA ROBERT	2.00												
DIRECTOR	0.00	x				i		o	o				0
(14) ANNNA SHACKLE		 	_							<u> </u>			
	2.00												
DIRECTOR	0.00	X						0	0				0
(15) GLENN GEORGE	2.00												
VICE CHAIRMAN	0.00	x		x				o	o				0
VIOD GIMILIUM	0.00												
		 	ļ						<u> </u>				 -
									<u> </u>				
1b Sub-total						L!	▶						
c Total from continuation shee d Total (add lines 1b and 1c)	ets to Part VII, S	ectio	n A				▶						
Total number of individuals (increportable compensation from t	_		to th	ose I	isted	l abo	ve) v	who received more than \$10	00,000 of			Val	Na
3 Did the organization list any for	mer officer, dire	ctor,	or tru	ıstee	, ke	/ emp	olove	ee, or highest compensated					No
employee on line 1a? If "Yes," of	complete Schedu	ıle J f	or su	uch i	ndıvi	dual	-	-			3		X
4 For any individual listed on line organization and related organization.									n the			‡	
ındıvıdual	_										4		X
5 Did any person listed on line 1a for services rendered to the org									lividual		5	ŧ	x
Section B. Independent Contractor		<u>0,</u> 00	,,,, <u>,,,</u>	0.0 0	,0,10	<i>uu,</i> 0 (701	ducii perdeii					
Complete this table for your five compensation from the organization.	e highest comper ation Report cor							year ending with or within the	he organization's tax year				
Name and	(A) business address							Descript	(B) ion of services		Con	(C) npensation	חו
											+		—
		—									-		
											-	.	—
						_	_						—
2 Total number of independent correceived more than \$100,000 o							ose I	isted above) who	0				
DAA	. sompensation i	, 01111		·gail	<u>a.i.i</u>	J. 1 F					Fom	990	(2016)

P	art V	/III Statement of Rev Check if Schedule	venue e O contains	a response	or note to any line i	in this Part VIII		rage
				,	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f		1a	946,858				
	h	Total. Add lines 1a-1f		Busn Code	946,858		1-11-111-1111-111-11	
Program Service Revenue	2a b c d		TUE		119,120	119,120		
grar	e f	All other program service rev	enue					
ř	_ g			<u> </u>	119,120			
	3 4 5	Investment income (including and other similar amounts) Income from investment of ta Royalties		•	117,760			117,760
	b	Gross rents Less rental exps		(II) Personal				
	d 7a	Net rental income or (loss)	28	(ii) Other				
	С	Less cost or other basis & sales exps Gain or (loss)						
venue		Net gain or (loss) Gross income from fundraising ev (not including \$ of contributions reported on line 10						
Other Revenue		See Part IV, line 18 Less direct expenses Net income or (loss) from funi	a					
	9a b	Gross income from gaming activities See Part IV, line 19 Less direct expenses	es a b					
	10a	Net income or (loss) from gan Gross sales of inventory, less returns and allowances Less cost of goods sold		>				
	11a	Net income or (loss) from sale Miscellaneous Revenue		Busn Code				
	c d	All other revenue						
	e 12	Total. Add lines 11a–11d Total revenue. See instruction	ns	>	1,183,738	119,120	0	117,760

Part IX Statement of Functional Expenses

	Check if Schedule O contains a response			ete column (A)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	784,325	784,325		
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22	453,232	453,232		, , , , , , , , , , , , , , , , , , , ,
3	Grants and other assistance to foreign	ļ			1
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16	ļ			
4	Benefits paid to or for members	 			<u> </u>
5	Compensation of current officers, directors,				
	trustees, and key employees	<u> </u>		· · · · · · · · · · · · · · · · · · ·	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	<u> </u>		<u> </u>	
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	ļ			
11	Fees for services (non-employees)				
a	J				
p	v	 			
c d	- · · · · ·				
e					
f	Investment management fees				
g					
9	(A) amount, list line 11g expenses on Schedule O)	83,170	83,170		
12	• • • • • • • • • • • • • • • • • • • •				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses litemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column		ļ		
	(A) amount, list line 24e expenses on Schedule O)				
а					
b		<u></u>			
C	i				
d	i				
е	All other expenses	1 220 727	1 220 727		0
25	Total functional expenses Add lines 1 through 24e	1,320,727	1,320,727	0	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and				
	from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if	1			
	following SOP 98-2 (ASC 958-720)				L

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year Cash-non-interest bearing 822,944 684,500 Savings and temporary cash investments 2 29,034 Pledges and grants receivable, net 30,489 3 58,880 58,880 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a b Less accumulated depreciation 10b 10c 5,100,000 5,100,000 11 Investments—publicly traded securities 11 12 Investments-other securities See Part IV, line 11 12 13 Investments—program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 6,010,858 5,873,869 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, 22 Liabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 0 0 26 Total liabilities. Add lines 17 through 25 26 X and Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. **Fund Balances** 6,010,858 5,873,869 27 Unrestricted net assets 27 28 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and ò complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32 6,010,858 5,873,869 33 Total net assets or fund balances 33 5,873,869 6,010,858 Total liabilities and net assets/fund balances

Form	990 (2016) WALTON ELECTRIC TRUST, INC. 58-2351746			Pa	ge 12
	rt XI Reconciliation of Net Assets			-	
	Check if Schedule O contains a response or note to any line in this Part XI	_			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,1	83,	738
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,3	320,	727
3	Revenue less expenses Subtract line 2 from line 1	3		.36,	989
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6,0	10,	858
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	5,8	<u>373,</u>	869
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				1
	Schedule O				1
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both				ţ
	Separate basis Consolidated basis Both consolidated and separate basis				1
b	Were the organization's financial statements audited by an independent accountant?		2b	X	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				Ì
	separate basis, consolidated basis, or both				1
	X Separate basis Consolidated basis Both consolidated and separate basis		-		1
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in				1
	Schedule O			1	Ŧ
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	_	3b	<u></u>	
			F	om 99	0 (2016)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt chantable trust

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

Namo	of the	e organization	WALTON ELECT	RIC TRUST, INC.			Employer identi	fication number		
P	art l	Reas		Status (All organizations	must co	mplete				•
				it is (For lines 1 through 12, ch			,		7	
1				ciation of churches described in	•	-	A)(i).	<u> </u>) /	
2		A school des	cribed in section 170(b)(1)(A	A)(ii). (Attach Schedule E (Form	990 or 99	0-EZ))	.,,		/ [
3				e organization described in sect).	Ŭ	ľ	
4				in conjunction with a hospital de				ital's name,		
		city, and state	e				,			
5		An organizati	on operated for the benefit of	a college or university owned o	r operated	by a gove	ernmental unit described in			
_	[]	,	(b)(1)(A)(iv). (Complete Part	•						
6	.		-	vernmental unit described in se						
7	X		ion that normally receives a s section 170(b)(1)(A)(vi). (Co	ubstantial part of its support fron omplete Part II)	n a goverr	imental ur	nit or from the general public			
8		A community	trust described in section 1	70(b)(1)(A)(vi). (Complete Part l	II)					
9				ribed in section 170(b)(1)(A)(ix						
		university	or a non-land grant college of	agriculture (see instructions) E	nter the na	ame, city,	and state of the college or			
10		•	on that normally receives (1)	more than 33 1/3% of its suppo	ort from co	ntributions	s, membership fees, and gross			
	اـــا	•	, ,	ot functions—subject to certain			-			
		• •	•	d unrelated business taxable inc			11 tax) from businesses			
			<u> </u>	, 1975 See section 509(a)(2).		•				
11	<u> </u>	•	•	xclusively to test for public safety			• • •			
12	Ш	•		xclusively for the benefit of, to pe ations described in section 509 (
				at describes the type of supporting				9		
	а		-	rated, supervised, or controlled	•		·			
			• • • • • • • • • • • • • • • • • • • •	er to regularly appoint or elect a		f the direc	tors or trustees of the			
	_		• •	omplete Part IV, Sections A an			d assessmentan(a), bu bayuna			
	b			ervised or controlled in connecting organization vested in the sa						
			tion(s) You must complete		,		•			
	С			apporting organization operated						
	d		• • • • • • • • • • • • • • • • • • • •	ructions) You must complete i . A supporting organization oper						
	u			organization generally must sati				•		
				ust complete Part IV, Section						
	е			ived a written determination from			Type I, Type II, Type III			
	£		• •	functionally integrated supporting	ig organiza	ation		Г		
	f g		nber of supported organizatio ollowing information about the					L		
_		e of supported	(ii) EIN	(III) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount o	of	
,	-	ganization	(, 2	(described on lines 1–10	listed in yo	ur governing	support (see	other support (
				above (see instructions))		ment?	instructions)	instructions)	
					Yes	No				-
(A)					ł	1				
(B)										
(0)										
(C)										•
(D)					-					
(D)										
(E)										•
					-	-				-
• - •	.1				1					

58-2351746

Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

1 Gift mer incli 2 Tax org to c 3 The furn orga 4 Tot	ts, grants, contributions, and mbership fees received (Do not lude any "unusual grants") or revenues levied for the ganization's benefit and either paid or expended on its behalf evalue of services or facilities hished by a governmental unit to the anization without charge tall. Add lines 1 through 3 exportion of total contributions by the person (other than a evernmental unit or publicly poorted organization) included on at 1 that exceeds 2% of the amount	920,550	(b) 2013 1,095,682 1,095,682		(d) 2015 1,231,369	(e) 2016 946,858	(f) Total
Tax org to co	mbership fees received (Do not lude any "unusual grants") or revenues levied for the ganization's benefit and either paid or expended on its behalf evalue of services or facilities hished by a governmental unit to the anization without charge tal. Add lines 1 through 3 exportion of total contributions by the person (other than a vernmental unit or publicly oported organization) included on				1,231,369	946,858	5,095,007
org to d 3 The furn orga 4 Tot	ganization's benefit and either paid or expended on its behalf evalue of services or facilities hished by a governmental unit to the anization without charge tal. Add lines 1 through 3 exportion of total contributions by the person (other than a vernmental unit or publicly oported organization) included on	920,550	1,095,682				
furn orga 4 Tot	nished by a governmental unit to the anization without charge tal. Add lines 1 through 3 portion of total contributions by the person (other than a person unit or publicly oported organization) included on	920,550	1,095,682			}	
	e portion of total contributions by th person (other than a vernmental unit or publicly oported organization) included on	920,550	1,095,682				
5 The	ch person (other than a vernmental unit or publicly oported organization) included on		t t	900,548	1,231,369	946,858	5,095,007
gov sup line	own on line 11, column (f)						
6 Pub	plic support. Subtract line 5 from line 4						5,095,007
Section	B. Total Support						
Calendar y	year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Am	ounts from line 4	920,550	1,095,682	900,548	1,231,369	946,858	5,095,007
pay rent	oss income from interest, dividends, rments received on securities loans, its, royalties and income from similar irces	55,468	61,014	80,172	138,549	117,760	452,963
acti	income from unrelated business vities, whether or not the business egularly carried on						
loss	er income Do not include gain or s from the sale of capital assets plain in Part VI)						
11 Tota	al support. Add lines 7 through 10	<u></u> .					5,547,970
12 Gro	ss receipts from related activities, etc. (s	see instructions)				12	119,120
13 Firs	st five years. If the Form 990 is for the o	rganization's first, s	econd, third, fourth	n, or fifth tax year as	a section 501(c)(3)	
	anization, check this box and stop here						•
<u>Section</u>	C. Computation of Public Su	pport Percenta	ige				
14 Pub	olic support percentage for 2016 (line 6, o	column (f) divided by	y line 11, column (t	f))		14	91.84%
15 Pub	olic support percentage from 2015 Scheo	lule A, Part II, line 1	4			15	93.75%
16a 33 1	1/3% support test—2016. If the organiz	ation did not check	the box on line 13,	, and line 14 is 33 1	/3% or more, check	this	. (22)
pox	and stop here . The organization qualifie	es as a publicly sup	ported organization	n			► X
	1/3% support test—2015. If the organiz				33 1/3% or more, of	check	
	box and stop here. The organization qu	• •	• •				▶ []
	%-facts-and-circumstances test—201						
	6 or more, and if the organization meets						
	t VI how the organization meets the "fact	s-and-circumstance	es" test. The organ	ization qualifies as	a publicly supported	1	▶ □
	anization						
	%-facts-and-circumstances test201	•				e	
	s 10% or more, and if the organization m						
•	plain in Part VI how the organization mee	ts the "facts-and-cir	cumstances" test	The organization qu	uatifies as a publicly	,	▶ □
	ported organization		10 10 10				▶ [_]
	vate foundation. If the organization did i	not check a box on l	line 13, 16a, 16b, 1	17a, or 17b, check t	his box and see		▶ □
ınstr	ructions						

Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))

33 1/3%, support tests—2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3% support tests—2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 1/8 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Investment income percentage from 2015 Schedule A, Part III, line 17

Schedule	A (Form	990 o	r 990-EZ	201

17

18

%

20

17

18

Part IV

Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section A. Al	Supporting Org	anizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation If historic and continuing relationship, explain
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer 3a (b) and (c) below
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

		Yes	No
		1	
	1		ļ
	_2	<u> </u>	<u></u>
	3a		
	3b		
	3с		
	-		
	4a		
	4b		
	4c		
	,		
	5a		1
	<u>5</u> b		
	5c		
	6		
	7		
Į	8		
			!
Į	9a		
	,		
	9b		
ŀ	9c		
İ	-7,7		,,
	10a		
ŀ	10b		
(Fo	rm 99	0 or 990-	EZ) 2016

Pa	a	е	

Pa	irt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		, ,,,,	
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a	1	
b		11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	[1]		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1 1	i	
Seci	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		j	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2]	
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
_	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
а				
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions	s)		
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
a	David and the second			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
b				
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		
)AA	Schedule A (F	orm 99	or 990-	EZ) 2016

CL	on C - Distributable Amount			Current rear
ı	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
ţ	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
5	Distributable Amount. Subtract line 5 from line 4, unless subject to			
em	ergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally integrated Type	e III su	ipporting organization (see	
	instructions)			

7

8

Recoveries of prior-year distributions

Minimum Asset Amount (add line 7 to line 6)

Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purp	oses		
2	Amounts paid to perform activity that directly furthers exempt purpos			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of sup	ported organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6			T
8	Distributions to attentive supported organizations to which the organizations	zation is responsive		
•	(provide details in Part VI) See instructions	Lation is responsive		
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
10	Line o amount divided by Line 5 amount	(3)	(ii)	/iii)
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
	Underdistributions, if any, for years prior to 2016			1
2	(reasonable cause required-explain in Part VI) See			
	instructions			
3	Excess distributions carryover, if any, to 2016			
a				1
b				<u> </u>
С	From 2013			
d	From 2014			
е	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			<u> </u>
j	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2016 from			
	Section D, line 7 \$			
а	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			-
	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if			
-	any Subtract lines 3g and 4a from line 2 For result	1		
	greater than zero, explain in Part VI. See instructions			ŀ
6	Remaining underdistributions for 2016 Subtract lines 3h			
•	and 4b from line 1. For result greater than zero, explain in			
	Part VI See instructions	[
7	Excess distributions carryover to 2017. Add lines 3j			
•	•			
0	and 4c			
8	Breakdown of line 7			
a_		····		
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
e	Excess from 2016			A (Form 990 or 990-EZ

Schedule A (Form 990 or 990-EZ) 2016

Part VI

WALTON ELECTRIC TRUST, INC.

58-2351746

Page 8

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information. (See instructions)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

Name of the organization

Employer Identification number

	•			
	ALTON ELECTRIC TRUST, INC.			351746
Pi	organizations Maintaining Donor Advised F Complete if the organization answered "Yes" or		ccounts	5.
	Complete it the organization and organization	(a) Donor advised funds	1	b) Funds and other accounts
1	Total number at end of year	(a) boild davised failes	 '	py i undo und other decounts
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)		 	
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing that	at the assets hold in depar advised	L	
3	funds are the organization's property, subject to the organization's excl			□ Ves □ Ne
6	Did the organization inform all grantees, donors, and donor advisors in	•		Yes No
U				
	only for charitable purposes and not for the benefit of the donor or don-	ior advisor, or for any other purpose		□ vaa □ Na
<u> </u>	conferring impermissible private benefit? art II Conservation Easements.			Yes No
	Complete if the organization answered "Yes" or	n Form 990, Part IV, line 7		
1	Purpose(s) of conservation easements held by the organization (check	k all that apply)		
	Preservation of land for public use (e.g., recreation or education)	Preservation of a historically impo	ortant land	area
	Protection of natural habitat	Preservation of a certified historic		
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified conse	ervation contribution in the form of a conserva	tion	
	easement on the last day of the tax year			Held at the End of the Tax Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic structure incl	cluded in (a)	2c	
đ		` '		
	historic structure listed in the National Register	·	2d	
3	Number of conservation easements modified, transferred, released, ex	xtinguished, or terminated by the organization	during the	· · · · · · · · · · · · · · · · · · ·
	tax year ▶	J,,,, J		
4	Number of states where property subject to conservation easement is	located >		
5	Does the organization have a written policy regarding the periodic mon			
	violations, and enforcement of the conservation easements it holds?	3,		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling o	of violations, and enforcing conservation ease	ments dur	ng the year
_	>	or the second se		, , , , , , , , , , , , , , , , , , , ,
7	Amount of expenses incurred in monitoring, inspecting, handling of viol	lations, and enforcing conservation easemen	ts during th	ne vear
•	S	ionoria, and ornoromy condervation casomen	to during tr	.o yea.
8	Does each conservation easement reported on line 2(d) above satisfy	the requirements of section 170(h)(4)(R)(i)		
-	and section $170(h)(4)(B)(ii)$?	requirements of econom 11 o(11)(11)(12)(1)		Yes No
9	In Part XIII, describe how the organization reports conservation easeming	ents in its revenue and expense statement, a	and	
-	balance sheet, and include, if applicable, the text of the footnote to the	•		
	organization's accounting for conservation easements	•		
Pa	art III Organizations Maintaining Collections of Art	t, Historical Treasures, or Other S	imilar A	ssets.
	Complete if the organization answered "Yes" on	Form 990, Part IV, line 8		
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), ne	not to report in its revenue statement and bala	nce sheet	
	works of art, historical treasures, or other similar assets held for public	exhibition, education, or research in furtheral	nce of	
	public service, provide, in Part XIII, the text of the footnote to its financial	al statements that describes these items		
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to	o report in its revenue statement and balance	sheet	
	works of art, historical treasures, or other similar assets held for public	exhibition, education, or research in furtherar	nce of	
	public service, provide the following amounts relating to these items			
	(i) Revenue included on Form 990, Part VIII, line 1		•	\$
	(ii) Assets included in Form 990, Part X		>	\$
2	If the organization received or held works of art, historical treasures, or	other similar assets for financial gain, provide	e the	
	following amounts required to be reported under SFAS 116 (ASC 958)	- · ·		
а	Revenue included on Form 990, Part VIII, line 1	•	•	\$
- h	Assets included in Form 990, Part X			œ.

<u>Sche</u>		ELECTRIC TRU			2351746	Page
Pa	art III. Organizations Maintaini	ng Collections of	Art, Historical Tr	easures, or Othe	er Similar Assets	(continued)
3	Using the organization's acquisition, access collection items (check all that apply)	sion, and other records,	, check any of the follow	ving that are a signification	ant use of its	
а	Public exhibition	d 🗍	Loan or exchange pro	grams		
b		e	Other	5.4		
c		ــا -				
4	Provide a description of the organization's of	ollections and explain t	how they further the ord	ranization's evernt ni	irnose in Part	
•	XIII	onconoria ana explain i	now and flarance are org	gamization's exempt po	inpose in rain	
5	During the year, did the organization solicit	or receive donations of	art, historical treasures	s, or other similar		
	assets to be sold to raise funds rather than					Yes No
P	art IV Escrow and Custodial A	rrangements.				
	Complete if the organization	on answered "Yes"	" on Form 990, Pa	rt IV, line 9, or rep	oorted an amount o	on Form
	990, Part X, line 21					
1a	Is the organization an agent, trustee, custod	lian or other intermedia	iry for contributions or o	other assets not		
	included on Form 990, Part X?					Yes No
b	If "Yes," explain the arrangement in Part XII	I and complete the folio	owing table			
	_				 _ _ _ _ _ _ _ _ _ _	Amount
С	• •				1c	
d	Additions during the year				1d	
е	. 5				1e	
f	Ending balance				1f	
	Did the organization include an amount on F			<u>-</u>		Yes No
	If "Yes," explain the arrangement in Part XII	Check here if the exp	lanation has been prov	rided on Part XIII		
Pa	ert V Endowment Funds.	on analysis of "Vas"	" on Form 000 D-	mt IV / Ivm = 40		
	Complete if the organization			T	T	T
		(a) Current year	(b) Pnor year	(c) Two years back	(d) Three years back	(e) Four years back
	Beginning of year balance		 	 	 	
	Contributions	ļ		 		
С	Net investment earnings, gains, and					
	losses		 	 	 	
	Grants or scholarships	 	 	 	 	 -
е	Other expenditures for facilities and					
	programs			 -		
f	Administrative expenses					
g	End of year balance			L		
2	Provide the estimated percentage of the cur	•	(line 1g, column (a)) he	eld as		
а	Board designated or quasi-endowment ▶	%				
	Permanent endowment ▶ %					
С	Temporarily restricted endowment ▶	%	•			
	The percentages on lines 2a, 2b, and 2c sho	•				
зa	Are there endowment funds not in the posse	ession of the organization	on that are neig and ad	ministered for the		Vas Na
	organization by					Yes No
	(i) unrelated organizations					3a(i)
	(ii) related organizations		4 . 0			3a(ii)
b	If "Yes" on line 3a(ii), are the related organiz	•				3b
4	Describe in Part XIII the intended uses of the		ment funds			
۳a	ert VI Land, Buildings, and Equ	•	on Form 000 De	d IV line 11e Co	- Form OOO Dort V	/ line 10
	Complete if the organization					
	Description of property	(a) Cost or other b	pasis (b) Cost or o	l i	Accumulated depreciation	(d) Book value
4-	Lond	(mivesument)	, com			
	Land					
	Buildings		- +			
	Leasehold improvements					
	Equipment					
	Other I. Add lines 1a through 1e (Column (d) must e	anual Form 990 Part Y	column (R) line 10c \			

Page 3

	Complete if the organization answered "	Yes" on Form 990, Part IV, line	11b. See Form 990, P	art X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method o Cost or end-of-ye	f valuation
(1) Financial	derivatives			
(2) Closely-h	eld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(E)				
				······································
(G)				
(H)	(h)		 	
	nn (b) must equal Form 990, Part X, col (B) line 12)		·····	
Part VIII	Investments—Program Related.	Voo" on Form 000, Dort IV line	11a Cao Farm 000 D	art V. lino 12
	Complete if the organization answered "		· -· -· -·	
	(a) Description of investment	(b) Book value	(c) Method o Cost or end-of-ye	
(1)				
_(2)	 			
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 13) ▶			
Part IX	Other Assets.			
	Complete if the organization answered "	Yes" on Form 990, Part IV, line	11d See Form 990, P.	art X, line 15.
	(a) Des	scription		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)		-		
(7)				
(8)				
(9)				
	nn (b) must equal Form 990, Part X, col (B) line 15)		•	
Part X	Other Liabilities. Complete if the organization answered "	Ves" on Form 990, Part IV, line	11c or 11f See Form	OON Part Y
	line 25	103 On Form 990, Part IV, IIIle	THE OF THE OCCUMENT	JJO, I GILA,
1.	(a) Description of liability	(b) Book value		
	Income taxes	(S) Book value		
(1) Federal (2)	moonic taxes			
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col (B) line 25)			
Liability for	uncertain tax positions. In Part XIII, provide the text of	-		_

	edule D (Form 990) 2016 WALTON ELECTRIC TRUST, INC.	58-235174		Page
Pa	art XI, Reconciliation of Revenue per Audited Financial Stateme		urn.	
	Complete if the organization answered "Yes" on Form 990, Pa	art IV, line 12a		
1	Total revenue, gains, and other support per audited financial statements		1_1_	1,231,081
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b 47,343		
С	Recoveries of prior year grants	2c		
đ	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	47,343
3	Subtract line 2e from line 1		3	1,183,738
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	1,183,738
Pa	art XII Reconciliation of Expenses per Audited Financial Statem	ents With Expenses per R	eturn.	
	Complete if the organization answered "Yes" on Form 990, Pa	art IV, line 12a		
1	Total expenses and losses per audited financial statements		1	1,368,070
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a 47,343		
b	Prior year adjustments	2b		
С	Other losses	2c	1	
d	Other (Describe in Part XIII)	2d	1	
е	Add lines 2a through 2d		_2e	47,343
3	Subtract line 2e from line 1		3	1,320,727
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	1,320,727

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Schedule D (Form 990) 2016 WALTON ELECTRIC TRUST, INC.

Part XIII Supplemental Information (continued)

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SCHEDULE 1 (Form 990)

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

OMB No 1545-0047

2016

Open to Public Inspection

Employer Identification number Yes 58-2351746 ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ▶ Attach to Form 990. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States INC. General Information on Grants and Assistance WALTON ELECTRIC TRUST, the selection criteria used to award the grants or assistance? Department of the Treasury Internal Revenue Service Name of the organization Part

e X (h) Purpose of grant or assistance Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form (g) Description of noncash assistance 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of noncash assistance 784,325 (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) (p) EIN (a) Name and address of organization (1) OTHER COMMUNITY ASSISTANCE or government Part II (2) 3 <u>₹</u> 9 9 6 8 6

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2016)

Schedule I (Fo	Schedule I (Form 990) (2016) WALTON ELECTRIC TRUST, INC.	RIC TRUST, IN		58-2351746		Page 2
Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22	Domestic Individua	ils. Complete if the or	ganization answered	"Yes" on Form 990, Part IV	
	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(f) Description of noncash assistance
		recipients	cash grant	noncash assistance	FMV, appraisal, other)	
1 CHAR.	1 CHARITABLE ASSISTANCE	34	146,232			
2 SCHO	2 SCHOLARSHIPS	132	307,000			
က						
4						
5						
Œ						
, ,						
Part IV	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	vide the information re	quired in Part I, line 2	, Part III, column (b),	and any other additional in	ıformation

PART IV - ADDITIONAL INFORMATION

EACH ORGANIZATION IS REQUIRED TO COMPLETE A GRANTEE REPORT WHICH KEEPS THE

TRUST INFORMED AS TO THE USE OF THE GRANT FUNDS.

SCHEDULE O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No 1545-0047 2016

Department of the Treasury Internal Revenue Service

Attach to Form 990 or 990-EZ. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

WALTON ELECTRIC TRUST,

Open to Public Inspection

Name of the organization

Employer identification number INC.

58-2351746

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 FORM 990 IS REVIEWED BY THE BOARD WITH ALL SUPPORTING DOCUMENTATION MADE AVAILABLE TO THEM.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY DIRECTORS AND CONSULTANTS OF THE WALTON ELECTRIC TRUST ARE TO ADHERE TO TH E HIGHEST LEGAL, MORAL AND ETHICAL STANDARDS OF SOCIETY IN ALL AREAS OF BU SINESS CONDUCT. CONFLICTS OF INTEREST ARE TO BE AVOIDED. UPON APPOINTMEN T, NEW DIRECTORS WILL READ AND SIGN THE CONFLICT OF INTEREST CERTIFICATION AND DISCLOSURE FORM. EXISTING DIRECTORS WILL READ AND SIGN THE CONFLICT OF INTEREST CERTIFICATION AND DISCLOSURE FORM ANNUALLY. THE FORM WILL BE SIGNED AT THE FIRST REGULAR BOARD MEETING OF EACH YEAR. THE FORMS WILL BE MAINTAINED IN A CONFIDENTIAL MANNER BY THE ACCOUNTING DEPARTMENT OF WALTON EMC.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION THE TRUST MAKES ITS BYLAWS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLI C AS PART OF ITS FORM 990. THE FORM 990 IS AVAILABLE UPON REQUEST AS REFL ECTED IN PART VI SECTION C LINE 18.