Form 990-PF

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

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

Force	lendar year 2016 or tax year beginning	9.0	3/01 , 2016, and endir	ng l	07/31,2017
Name	of foundation			A Employer identi	fication number
ĄTK	INS FAMILY TRUST FOUNDATION			54-644334	14
Numb	er and street (or P O box number if mail is not delivered	to street address)	Room/suite	B Telephone num	ber (see instructions)
P.0	. BOX 1404			(417) 6:	2 4-6644
City or	town, state or province, country, and ZIP or foreign pos	ital code	<u> </u>		
				C If exemption application pending, check her	cation is
JOP	LIN, MO 64802			portang, around	
G Che	eck all that apply: Initial return	Initial return	of a former public chari	ty D 1 Foreign organiz	ations, check here
	Final return	Amended ref	turn	2. Foreign organiz	zations meeting the
	Address change	Name change	e		here and attach
H Che	eck type of organization: X Section 501(c)(3) exempt private f	oundation $\mathcal{O} \mathcal{V}$	E if private foundate	on atotus was terminated
	Section 4947(a)(1) nonexempt charitable trust	Other taxable pr	ivate foundation		on status was terminated (b)(1)(A), check here
I Fan	market value of all assets at J Acco	unting method: X Ca			s in a 60-month termination
end	of year (from Part II, col. (c), line	ther (specify)			b)(1)(B), check here
		column (d) must be on cas	sh basis.)		
Part	Analysis of Revenue and Expenses (The	(a) Revenue and			(d) Disbursements
	total of amounts in columns (b), (c), and (d)	expenses per	(b) Net investment income	(c) Adjusted net income	for charitable purposes
	may not necessarily equal the amounts in column (a) (see instructions))	books	HICOHIC	moome	(cash basis only)
1	Contributions, gifts, grants, etc., received (attach schedule)	100,000.			
2	Check If the foundation is not required to attach Sch. B.				
3	Interest on savings and temporary cash investments.	32.	32.		ATCH 1
4	Dividends and interest from securities				
5a	Gross rents				
Ь	Net rental income or (loss)				
⊈ 6a	Net gain or (loss) from sale of assets not on line 10				
Ĭ,	Gross sales price for all assets on line 6a				SENVED
Revenue	Capital gain net income (from Part IV, line 2) .		0.	KE	
œ 8	Net short-term capital gain				S
9	Income modifications			16 DEC	13 2017 19
10 a	Gross sales less returns and allowances			0	RS
Ь	Less Cost of goods sold .				771 17
C	Gross profit or (loss) (attach schedule)			OG	
11	Other income (attach schedule) ATCH, 2	2,450.	2,450.		
12	Total. Add lines 1 through 11	102,482.	2,482.		
13	Compensation of officers, directors, trustees, etc	0.			
S 14	Other employee salaries and wages				
15	Pension plans, employee benefits				
№ 16a	Pension plans, employee benefits Legal fees (attach schedule) Accounting fees (attach schedule) Other professional fees (attach schedule) Interest Taxes (attach schedule) (see instructions). Depreciation (attach schedule) and depletion. Occupancy Travel, conferences, and meetings Printing and publications Other expenses (attach schedule) Total operating and administrative expenses. Add lines 13 through 23. Contributions, gifts, grants paid Total expenses and disbursements. Add lines 24 and 25				
8 P	Accounting fees (attach schedule)	4,259.	2,129.		2,130
. <u>₹</u>	Other professional fees (attach schedule)				
E 17	Interest				
. <u>S</u> 18	Taxes (attach schedule) (see instructions)	11-00-	1 222		
Ē 19	Depreciation (attach schedule) and depletion.	11,382.	1,309.		
20	Occupancy	9,922.	1,141.		8,781
글 21	Travel, conferences, and meetings				
rg 22	Printing and publications				
E 23	Other expenses (attach schedule)				
24	Total operating and administrative expenses.	05.55			
ē	Add lines 13 through 23	25,563.	4,579.	 	10,911
O 25	Contributions, gifts, grants paid	21,000.			21,000
_	· · · · · · · · · · · · · · · · · · ·	46,563.	4,579.	0	31,911
27	Subtract line 26 from line 12:				
a	•	55,919.			
6	, , ,		0.		
0	Adjusted net income (if negative, enter -0-)	<u> </u>	1		_

JSA For Paperwork Reduction Act Notice, see instructions.
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Form 990-PF (2016)

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Part II	Balanca Shoots	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End @	of year
Partii	Datance Sneets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bear	nng	9,089.	76,360.	76,360.
		cash investments	30,599.	30,629.	30,629.
	Accounts receivable				
- 1		ibtful accounts ▶			
- 1	Pledges receivable ▶	 -			
		ubtful accounts ▶			
5					
6		officers, directors, trustees, and other			
		ttach schedule) (see instructions)		* }	
7		receivable (attach schedule)			
	Less allowance for dou	ubtful accounts ▶	-		
8	Inventories for sale or u	se	·		
တ္တု 9	Prepaid expenses and	deferred charges			-
⋖ 10a	Investments - U S, and sta	ite government obligations (attach schedule), ,			
b	Investments - corporat	e stock (attach schedule)			
a, c	Investments - corporat	e bonds (attach schedule)			
11	and equipment basis	Js, •			ļ
	Less accumulated deprec (attach schedule)	nation >			-
12		eloans			
13	Investments - other (att	tach schedule)			
14	Land, buildings, and equipment basis	► 468,552.			
	Less accumulated deprece (attach schedule)	183,640.	296,294.	284, 912	202,000
15	Other assets (describe				
16		completed by all filers - see the			
		page 1, item I)	335,982.	391,901	308,989
17		accrued expenses		·-	
18	• •				
l l				****	-
19				·	1 !
<u>≅</u> 20		tors, trustees, and other disqualified persons	7		1
Liabilities 19 20 21 22		The state of the s			1
22	Other liabilities (descri	De ▶)			1
100	Tetal liabilities (add lin	nes 17 through 22)	0.	0	
23			· ·		1
ဖ		ollow SFAS 117, check here . ▶ ☐ 3 and 31.			
8	-	_			
or Fund Balances			<u> </u>		-
25	Temporarily restricted			<u> </u>	
교 26	•				4
5	Foundations that de	o not follow SFAS 117,			
빈	check here and cor	nplete lines 27 through 31.			
0 27	Capital stock, trust pri	ncipal, or current funds	<u> </u>		-
Net Assets 30 31 28 28	Paid-in or capital surplus,	or land, bldg, and equipment fund	367,150.	335,982	
S 29	Retained earnings, accur	mulated income, endowment, or other funds	-31,168.	55,919	<u>.</u>]
₹ 30	Total net assets or fu	nd balances (see instructions)	335,982.	391,901	<u>.</u>
2 31	Total liabilities and	d net assets/fund balances (see			
	instructions)	<u></u>	335,982.	391 , 90 <u>1</u>	
Part		anges in Net Assets or Fund Bala	nces		
		balances at beginning of year - Part		nust agree with	
		ted on prior year's return)			335,982
		I, line 27a		· · · · · · · · · · · · · · · · · · ·	55,919
				_	
					391,901
	creases not included			5	
		balances at end of year (line 4 minus	s line 5) - Part II, column (f		391,901
0 10	ar net assets or fund	Daidiloco at end of year time + filling	and of tractif, column (-,, -	Form 990-PF (2016)

	d describe the kind(s) of property sold (crick warehouse; or common stock, 200	- ·	(b) How acquired P - Purchase	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
<u> </u>	rick wateriouse, or common stock, 200	SIIS WILC CO)	D - Donation	(iio, day, yr /	(1110 , dd), ji /
<u>1 a</u>			_	 	
C			=		
		-		 - 	
<u> </u>				-	
	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (los	
(e) Gross sales price	(or allowable)	plus expense of sale		(e) plus (f) minu	
a					_
b					
С				···-	
d					
е					
Complete only for assets :	showing gain in column (h) and owned	by the foundation on 12/31/69	(1)	Gains (Col. (h) ga	ain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col. (j), if any		(k), but not less the Losses (from col	nan -0-) or
a					
b					
С					
d					
<u>e</u>					
2 Capital gain net income	or (not canital lose)	ain, also enter in Part I, line 7			
	(π(ι	oss), enter -0- in Part I, line 7	2		
_	gain or (loss) as defined in sections				
· · · · · · · · · · · · · · · · · · ·	Part I, line 8, column (c) (see ins		_		
Part I, line 8 Part V Qualification (For optional use by domesti	Under Section 4940(e) for Rec private foundations subject to the			me)	
Part I, line 8 Part V Qualification If For optional use by domesting section 4940(d)(2) applies, Was the foundation liable for	Under Section 4940(e) for Rec private foundations subject to the leave this part blank	duced Tax on Net Investment In e section 4940(a) tax on net investr outable amount of any year in the ba	ment inco		Yes X N
Part I, line 8 Part V Qualification (For optional use by domestic section 4940(d)(2) applies, Vas the foundation liable for "Yes," the foundation does	Under Section 4940(e) for Records of the control of the control of the control of the control of the section 4942 tax on the distribution of qualify under section 4940(e).	duced Tax on Net Investment In e section 4940(a) tax on net investr outable amount of any year in the ba Do not complete this part	nent inco	d?	Yes X No
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Part I, line 8 Part V Qualification II For optional use by domestic section 4940(d)(2) applies, Vas the foundation liable for "Yes," the foundation does 1 Enter the appropriate a (a) Base penod years Calendar year (or tax year beginning in) 2015 2014 2013 2012 2011 Total of line 1, column (3 Average distribution rat number of years the foundation of the column of the co	Under Section 4940(e) for Recommendations subject to the private foundations subject to the leave this part blank The section 4942 tax on the distribution of qualify under section 4940(e) mount in each column for each year. (b) Adjusted qualifying distributions 16,969. 64,916. 13,433. 12,710. 30,830. (d) In for the 5-year base period - dividual distribution has been in existence if leavencharitable-use assets for 2016.	duced Tax on Net Investment In e section 4940(a) tax on net investment are section and section are section as a section and section are section as a sect	ase perio	d?	0.339251 0.837237 0.131009 0.212229 0.414616 1.934342 0.386868 83,628.
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90-PF (2016) ATKINS FAMILY TRUST FOUNDATION 54-644	<u>3344</u>	P	age 4
VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948- see in	struc	tions)
Exempt operating foundations described in section 4940(d)(2), check here			
Į į			0
here and enter 1% of Part I, line 27b			
			0
			0
			0
Exempt foreign enganizations - tax manifest at source			
Tax pare that application of extension of time to the (i of the coop),			
Table and the and a supports Add lines Code with Code			0
			0
Tax date. If the total of infect a line of their allocation of the control of the			<u>_</u>
	1	V	Na
	10	res	No X
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	1.		ļ
	10		X
	1		
	10		X
	1 1		
			١
Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
If "Yes," attach a detailed description of the activities	l		
	1		١
incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			X
Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
If "Yes," has it filed a tax return on Form 990-T for this year?	4b	_N/	7
Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
If "Yes," attach the statement required by General Instruction T			1
Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
By language in the governing instrument, or			
By state legislation that effectively amends the governing instrument so that no mandatory directions that			
conflict with the state law remain in the governing instrument?	6	_ <u>x</u> _	
Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	<u>X</u>	<u> </u>
· · · · · · · · · · · · · · · · · · ·	1 1		1
VA,			
If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
(or designate) of each state as required by General Instruction Gº If "No," attach explanation	8b	_X	\perp
Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or]		
	i l		1
4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"	1 1		
	9_		<u> </u>
4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		Х
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see in Exempt operating foundations described in section 4940(d)(2), check here and enter *NA** or line 1. Date of ruling or determantion letter. Tax based or an and enter 1% of Part I, line 27b. Tax based on an enter 1% of Part I, line 27b. Tax based on of more to foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, cot (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2 Add lines 1 and 2 .	Exergise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instruct Exempt operating foundations described in section 4940(d)(2), check here	Excise Tax Based on Investment Income (Section 4940(a), 4940(e), or 4948- see instructions

Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
••	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions),	11		Х
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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ▶ DAVID JONES Telephone no ▶ 417-624	-664	4	
• •	Located at ▶ PO BOX 1404 JOPLIN, MO ZIP+4 ▶ 64802			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	\cdot
	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		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country ▶ N/A			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		1	
	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?	İ		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? X Yes No	ľ	1	
	(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)?		:	
	(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			
ь	of fany answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1b	<u> </u>	X
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	'''		 -
_	Organizations relying on a current notice regarding disaster assistance check here			
C	were not corrected before the first day of the tax year beginning in 2016?	1c		Х
•	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
2	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
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?			
	If "Yes," list the years ▶ N/A			
t	Are there any years listed in 2a for which the foundation is not 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)	2b	N	/A
	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	► N/A ,, ,,	1		
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
t	olf "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	-	-	<u> </u>
	foundation had excess business holdings in 2016)	3b	N/	
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	 	X
ŧ	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4	+-	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	<u> </u>	\ <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>	<u> </u>

NONE

other allowances

NONE

ATKINS FAMILY TRUST FOUNDATION

Form 990-PF (2016)		Page 7
Part VIII Information About Officers, Directors, Trustees, Found Contractors (continued)	undation Managers, Highly Paid Employ	/ees,
3 · Five highest-paid independent contractors for professional se	rvices (see instructions). If none, enter "NON!	E."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		
		
Total number of others receiving over \$50,000 for professional services	s	NONE
Part IX-A Summary of Direct Charitable Activities	·	
- Cultimary of Direct Offariable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include organizations and other beneficiaries served, conferences convened, research papers prod		Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see in	nstructions)	T
Describe the two largest program-related investments made by the foundation during the	tax year on lines 1 and 2	Amount
1 NONE		
		
2		
All other program-related investments See instructions		
3 NONE		
Total. Add lines 1 through 3	<u> </u>	NONE
		Form 990-PF (2016)

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Part	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	gn foundations	,
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	30,614.
b	Average of monthly cash balances	1b	54,288.
C	Fair market value of all other assets (see instructions)	10	
d	Total (add lines 1a, b, and c)	1d	84,902.
е		}]	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	84,902.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see	1	
	instructions)	4	1,274.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	83,628.
6	Minimum investment return. Enter 5% of line 5	6	4,181.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations check here ▶ □ and do not complete this part.)	ndations	
1	Minimum investment return from Part X, line 6	1	4,181.
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016 (This does not include the tax from Part VI).]	
С		2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	4,181.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4	5	4,181.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	4,181.
	t XII Qualifying Distributions (see instructions)	1 - 1	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		21 011
a		1a	31,911.
b		1b	
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	, , , , , , , , , , , , , , , , , , , ,	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	31,911.
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 (see instructions)		0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	31,911.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when co	alculating whetl	her the foundation
	qualifies for the section 4940(e) reduction of tax in those years		

_	rt XIII Undistributed Income (see instru	ictions)			Page 9
	Distributable amount for 2016 from Part XI,	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
•	line 7				4,181.
2	Undistributed income, if any, as of the end of 2016				
	Enter amount for 2015 only				
	Total for pnor years 20 14 ,20 13 ,20 12				
	Excess distributions carryover, if any, to 2016.				
а	From 2011				ĺ
	From 2012 9, 716.				
С	From 2013 8, 306.				
d	From 2014 61,039.				
е	From 2015				
	Total of lines 3a through e	120,641.			
4	Qualifying distributions for 2016 from Part XII,				
	line 4 ▶ \$ 31,911.				
а	Applied to 2015, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required - see instructions),	· <u>-</u>			
c	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2016 distributable amount				4,181.
e	Remaining amount distributed out of corpus	27,730.			
5	Excess distributions carryover applied to 2016. (If an amount appears in column (d), the same				
6	emount must be shown in column (a)) Enter the net total of each column as indicated below:				:
a	Corpus Add lines 3f, 4c, and 4e Subtract line 5	148,371.			
b	Pπor years' undistributed income Subtract				
c	Inne 4b from line 2b				
c	Subtract line 6c from line 6b Taxable				
	amount - see instructions				
€	Undistributed income for 2015. Subtract line 4a from line 2a Taxable amount - see instructions				
f	Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017				!
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)			 	
8	Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions)	27,112.			
9	Excess distributions carryover to 2017.				
	Subtract lines 7 and 8 from line 6a	121,259.			
10	Analysis of line 9				
í	9,716.				
ı	Excess from 2013				
•	Excess from 2014 61,039.				
	d Excess from 2015 14,468.				
	Excess from 2016 27,730 .				Form 990 DE (2016)

Рa	rt XIV Private Op	erating Foundations	(see instructions ar	nd Part VII-A, question	on 9)	NOT APPLICABLE
1 a	If the foundation has				. I	
h	foundation, and the ruling Check box to indicate v	•	_)(3) or 4942(j)(5)
_	CHOOK DOX to manage	Tax year	ритала арагалия	Prior 3 years		
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
	I or the minimum investment return from Part X for each					
	year listed				/	
þ	85% of line 2a				/	
C	Qualifying distributions from Part XII, line 4 for each year listed			/	/	
d	Amounts included in line 2c not					
	used directly for active conduct of exempt activities					
e	Qualifying distributions made					
	directly for active conduct of exempt activities Subtract line					
3	2d from line 2c Complete 3a, b, or c for the			/		
•	alternative test relied upon "Assets" alternative test - enter					
•	(1) Value of all assets					
	(2) Value of assets qualifying under section					
	4942(j)(3)(B)(i)					-
b	"Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X, tine 6 for each year listed					
c	"Support" alternative test - enter	-				
	(1) Total support other than gross investment income					
	(interest, dividends, rents, payments on securities					
	loans (section 512(a)(5)),					
	or royalties)					
	public and 5 or more exempt organizations as					
	provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of sup- port from an exempt					
	organization	/		 -		
Pa				only if the founda	tion had \$5,000 o	r more in ass et s at
_		luring the year - see				
1	Information Regardin	ng Foundation Manage	rs: have contributed mor	e than 2% of the total	al contributions recei	ved by the foundation
٠	before the close of an	y tax year (but only if the	ney have contributed i	more than \$5,000) (S	ee section 507(d)(2))	
	PAUL AND SA	ARAH ATKINS				
t	List any managers of	the foundation who rship or other entity) o	own 10% or more of	f the stock of a corp	poration (or an equal	ly large portion of the
	ownersnip of a partne	ersnip or other entity) o	which the foundation	illas a 10% oi greatei	interest.	
	N/A					
2	Information Regardin	ng Contribution, Grant	, Gift, Loan, Scholars	hip, etc., Programs:		
	Check here ► X if	the foundation only	makes contributions	to preselected char	itable organizations	and does not accept
		for funds If the found plete items 2a, b, c, an		ants, etc (see instruc	tions) to individuals	or organizations under
	The name, address, a			the person to whom ar	oplications should be a	ddressed:
	N/A					
-	The form in which app	olications should be su	bmitted and informati	on and materials they	should include.	
	/					
_	N/A Any submission dead	lines:				
•	, and					
_	N/A				able fields limits -4	inctitutions are atten-
•	d Any restrictions or lactors:	ilmitations on awards	s, such as by geogi	apnicai areas, charit	apie Tields, Kinds Of	institutions, or other
	N/A					

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Recipient Name and address (home or business) Recipient Rec								
- Positions	If recipient is an individual,	Foundation	uture Payment					
Name and address (home or humpers)	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount				
a Paid during the year	or substantial contributor	recipient						
a Paid during the year								
ATCH 4								
AICH 4								
		}						
		1						
				ł				
Total		<u> </u>	▶ 3a	21,000.				
b Approved for future payment				21,333.				
a Approved for fatare paymont				1				
NONE								
				1				
Total	<u> </u>	<u></u>	▶ 3b	NONE				

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Part XVI-	A Analysis of Income-Prod	ucing Act	ivities			
Enter gross a	amounts unless otherwise indicated	Unrela (a)	ated business income (b)	Excluded b	y section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program	service revenue	Business code	Amount	Exclusion code	Amount	(See instructions.)
a						<u> </u>
b						
c						*****
d						- -
e						· - -
		<u> </u>		 		
g Feesa	nd contracts from government agencies	_		+		
2 Members	hip dues and assessments			+		
3 Interest or	savings and temporary cash investments •	 -	-	14	32	
	s and interest from securities			14	32.	
	I income or (loss) from real estate	 		 		
	financed property	<u> </u>		 		
	ebt-financed property	<u> </u>				
	income or (loss) from personal property	<u> </u>				
	restment income			+		
-	oss) from sales of assets other than inventory					
	ne or (loss) from special events		-			
	ofit or (loss) from sales of inventory			 		
	mcu s			-	2,450.	· · · · · · · · · · · · · · · · · · ·
				 		
_		-	-			
e				<u> </u>		
	Add columns (b), (d), and (e)				2,482.	
	d line 12, columns (b), (d), and (e)				13	2,482.
	eet in line 13 instructions to verify calc					
Part XVI-	Relationship of Activitie	s to the A	ccomplishment of E	xempt Pur	poses	
Line No. ▼	Explain below how each activity accomplishment of the foundation					
	N/A					<u> </u>
				_		
			·			
						
		<u> </u>				·
						·
						·
				-		
						
						<u> </u>
				_		

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Part	XVII	Information R Exempt Orga		ansfers To and T	ransactio	ns and Rela	tionships With Nor	char	itable)
1	Old the	organization direc	tly or indirectly	engage in any of the	following v	vith any other	organization described	T	Yes	No
			ode (other than	section 501(c)(3) org	ganizations)	or in section 5	27, relating to political			1
	•	ations?								İ
a	Transfe	ers from the reportu	ng foundation to	o a noncharitable exe	mpt organiza	ation of		1	1	l
	•						• • • • • • • • • • • • •		7	X
•		er assets ransactions					• • • • • • • • • • • • • • • • • • • •	1a(2)		X
(1) Sale	es of assets to a no	oncharitable exe	empt organization				1 b(1)		X
										X
		•	-					1		X
	-	-					• • • • • • • • • • • • • • • • • • • •			X
							• • • • • • • • • • • • • • • • • • • •	1	1	X
							• • • • • • • • • • • • • • • • • • • •	1b(6)	 	^-
							(b) should always sho		four m	ь
							oundation received less			
		•			_		goods, other assets, or			
(a) Lin		(b) Amount involved		noncharitable exempt organ		···	transfers, transactions, and sh			
		N/A				N/A				
_			1							
				<u></u>						
				·		<u> </u>	~			
									_	
			 		——— [-					
			1							
										
			 							
C	describ) of the Code (c	ffiliated with, or relat			kempt organizations		es X] No
		(a) Name of organization	nc	(b) Type of org	ganization		(c) Description of relation	ship		
										
		· ·					· · · · · · · · · · · · · · · · · · ·			
							and to the best of my knowled	ge and	behef rt	is true
C:	correct	and complete Declaration of	preparer (other than	taxpayer) is based on all informa	ation of which prep	parer has any knowled				
Sign		11/1/14		30 Nov 2	ا 17م	Trustea	May the IF with the p	reparer		return below
Here	Sign	ature of officer or trustee		Date	Tit	lle	(see instruction		7 .	No
		Print/Type preparer's as	anne	Preparer's signature		Date		PTIN		
Paid		Print/Type preparer's na		Atuen RH	descent-		Check if Check if self-employed		4677	, ¬
Prep	arer	STEVEN R HARP		IG U.S. LLP	mynoce	1''/2		P007		
Use				IT PLEZA, SUIT	F 1300		Firm's EIN ► 34 - 6	2023	70	
- JOE 1	~y ∣	Firm's address 🕨 🗀	, or the instruction,	ar ran-cr, coll.	1000		ı			

Phone no 314-290-1000

CLAYTON, WC

63105

Schedule B

(Form 990, 990-EZ, or 990-PF)

Schedule of Contributors

OMB No 1545-0047

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. Department of the Treasury Internal Revenue Service

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number

ATKINS FAMILY TRUST	FOUNDATION	54-6443344
Organization type (check one	e)·	34 0443344
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private	foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foun	dation
	501(c)(3) taxable private foundation	
	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and	a Special Rule. See
General Rule		
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contr or property) from any one contributor Complete Parts I and II. See instru contributions	
Special Rules		
regulations under s 13, 16a, or 16b, ai	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 99 and that received from any one contributor, during the year, total contribution of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1	90 or 990-EZ), Part II, line ons of the greater of (1)
contributor, during	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that the year, total contributions of more than \$1,000 exclusively for religious, onal purposes, or for the prevention of cruelty to children or animals. Com	charitable, scientific,
contributor, during contributions totale during the year for General Rule appli	the year, contributions exclusively for religious, charitable, etc., purposes, ed more than \$1,000. If this box is checked, enter here the total contributions exclusively religious, charitable, etc., purposes. Don't complete any of the set to this organization because it received nonexclusively religious, charital more during the year	but no such ons that were received ne parts unless the ble, etc., contributions
990-EZ, or 990-PF), but it me	it isn't covered by the General Rule and/or the Special Rules doesn't file S ust answer "No" on Part IV, line 2, of its Form 990, or check the box on lir to certify that it doesn't meet the filing requirements of Schedule B (Form 9	e H of its Form 990-EZ or on its
Ear Panerwork Reduction Act Noti	ice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedi	le B (Form 990, 990-EZ, or 990-PF) (2016)

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Name of organization ATKINS FAMILY TRUST FOUNDATION

Employer identification number

Part i	Contributors (See instructions). Use duplicate co	pies of Part I if additional space is no	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PAUL ATKINS 4713 ROCK SPRING ROAD ARLINGTON, VA 22207	\$100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization ATKINS FAMILY TRUST FOUNDATION

Employer identification number

	1	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	<u> </u>	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	 \$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	 \$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	(b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given	Description of noncash property given Column

Name or o	organization ATKINS FAMILY TRUST FO	UNDATION		Employer identification number
Part III 、	Exclusively religious, charitable, etc. (10) that total more than \$1,000 for the following line entry. For organizate contributions of \$1,000 or less for the Use duplicate copies of Part III if additional entry in the second s	the year from any one ons completing Part III, e year. (Enter this inforr	e contributor. Compense enter the total of ex	olete columns (a) through (e) and clusively religious, chantable, etc.
(a) No. from Part I	(b) Purpose of gift	(c) Use of gi	ift	(d) Description of how gift is held
<u> </u>				
		(e) Transfer of	f gift	
	Transferee's name, address, an	d ZIP + 4	Relationship	of transferor to transferee
				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gi	ift	(d) Description of how gift is held
		(e) Transfer of	r aift	
		(e) Hallstei Ol	giit	
	Transferee's name, address, an	d ZIP + 4	Relationship	of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gi	in	(d) Description of how gift is held
		(e) Transfer of	gift	
	Transferee's name, address, an	.d 7ID ± A	Pelationehin	of transferor to transferee
	rransieree s name, address, an	M ZIF 14	Kelationsiiip	or transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gi	ift	(d) Description of how gift is held
		(e) Transfer of	gift	
	Transferee's name, address, an	d ZIP + 4	Relationship	of transferor to transferee

ATTACHMENT

54-6443344

- INTEREST ON TEMPORARY CASH INVESTMENTS PART I FORM 990PF,

NET INVESTMENT INCOME 31. AND EXPENSES PER BOOKS REVENUE DESCRIPTION CITI BANK TD BANK

TOTAL

31.

4482

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54-6443344

ATTACHMENT 2

INCOME	
- OTHER	
PART I	
990PF,	
FORM	

	NET	INVESTMENT	INCOME	2,450.	2,450.
REVENUE	AND	EXPENSES	PER BOOKS	2,450.	2,450.
					TOTALS
			DESCRIPTION	RENT - WEST IVY PROPERTY	

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	CERS, DIRECTORS, AND TRUSTEES		ATTACHMENT 3	MENT 3
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
HAROLD ATKINS 10 COMMERCIAL WHARF WEST APT 402 BOSTON, MA 02110	TRUSTEE 1.00	.0	· o	.0
PAUL ATKINS 4713 ROCK SPRING ROAD ARLINGTON, VA 22207	TRUSTEE 1.00	Ċ	Ö	Ö
ETHELMAE HUMPHREYS P O BOX 1404 JOPLIN, MO 64802	TRUSTEE 1.00	·	Ö	·o
	GRAND TOTALS	0.	0	0.

NO.
FOUNDATIO
TRUST
×

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

2016 FORM 990-PF

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

NO RELATIONSHIP

2

5547 LEE HIGHWAY FIRST FLOOR

BEYOND THE HOOP

ARLINGTON, VA 22207

RECIPIENT NAME AND ADDRESS

14 EAST 60TH STREET SUITE 1000

NEW YORK, NY 10022

429 NORTH CHURCH STREET SPARTANBURG, SC 29303

WOFFORD COLLEGE

AMERICAN COUNCIL ON GERMANY

54-6443344

ATKINS FAMIL

27806U 2256 11/11/2017

NO RELATIONSHIP
PC NO RELATIONSHIP
PC

AMOUNT PURPOSE OF GRANT OR CONTRIBUTION

GENERAL ADMINISTRATION

10,000.

10,000.

GENERAL ADMINISTRATION

1,000.

GENERAL ADMINISTRATION

ATTACHMENT 4

21,000 TOTAL CONTRIBUTIONS PAID

PAGE 21 ATTACHMENT 4

V 16-7.6F

54-6443344

ATTACHMENT 5

FORM 990-PF, PART XVI-A - ANALYSIS OF OTHER REVENUE

ATKINS FAMILY TRUST FOUNDATION

ATTACHMENT 5 PAGE 22

RELATED OR EXEMPT FUNCTION INCOME						
AMOUNT	2,450.	2,450.				
CODE	16					
AMOUNT						
BUSINESS CODE						
DESCRIPTION	OTHER INCOME - RENT WEST IVY PROPERTY	TOTALS				

Atkins Family Trust Foundation - Form 990PF EIN 54-6443344 Year Ended 7/31/2017

Depreciation schedule to support Part I, line 19 and Part II, line 14

Current

	<u>Date</u>		Tax Prior	Method of		Year	삘	Tax	Tax Net	¥ E
Property description	Acquired	Basis	Depreciation	Computation	Life	Depreciation	iation	End Depreciation	on Book Value	Value
Building	11/1/2005	\$376,160	\$ 103,684	straight line	39 yr	\$	9,645	\$ 113,329	29 \$ 262,83	,831
Furniture/fixtures	11/1/2005	31,728	31,728	straight line	7 yr		•	31,728	82	1
Furniture/fixtures	7/1/2006	18,877	18,877	straight line	7 yr			18,8	11	
Grounds/landscape	11/1/2005	13,550	9,735	straight line	15 yr		903	10,6		,912
Grounds/landscape	8/1/2006	10,925	7,280	straight line	15 yr		728	8,008		2,917
Grounds/landscape	5/11/2007	1,590	954	straight line	15 yr		106	1,0		530
Land	1/10/2001	15,722	1					'	15,	15,722
TOTAL		\$468,552	\$468,552 \$ 172,258			\$ 11	11,382	\$ 183,640	\$ 284,912	,912