

For calendar year 2016, or tax year beginning 10-01-2016, and ending 09-30-2017

Name of foundation MARTHA ANN COGDELL HOSPITAL TRUST		A Employer identification number 75-6013973	
Number and street (or P O box number if mail is not delivered to street address) 701 S TAYLOR SUITE 200		Room/suite	B Telephone number (see instructions) (806) 349-9892
City or town, state or province, country, and ZIP or foreign postal code AMARILLO, TX 79101			
G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change		D 1. Foreign organizations, check here 2. Foreign organizations meeting the 85% test, check here and attach computation	
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 6,485,262		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here	
J Accounting method ☒ Cash ☐ Accrual ☐ Other (specify) (Part I, column (d) must be on cash basis)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)				
	2 Check ☒ if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	62,019	62,019		
	4 Dividends and interest from securities	33,939	33,939		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	112,277			
	b Gross sales price for all assets on line 6a				
		522,845			
	7 Capital gain net income (from Part IV, line 2)		112,277		
	8 Net short-term capital gain				
	9 Income modifications				
Operating and Administrative Expenses	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	557,454	557,454		
	12 Total. Add lines 1 through 11	765,689	765,689		
	13 Compensation of officers, directors, trustees, etc	27,661	27,661		
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	3,475	3,475		
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	44,904	44,904		
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	19,429	19,429		
	24 Total operating and administrative expenses. Add lines 13 through 23	95,469	95,469		0
	25 Contributions, gifts, grants paid	490,000			490,000
	26 Total expenses and disbursements. Add lines 24 and 25	585,469	95,469		490,000
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	180,220			
	b Net investment income (if negative, enter -0-)		670,220		
c Adjusted net income(if negative, enter -0-)					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	932,596	658,661	658,661
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges	641		
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	956,881	826,559	1,315,895
	c	Investments—corporate bonds (attach schedule)	1,996,138	2,581,256	2,591,131
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)	5	5	1,919,575	
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	3,886,261	4,066,481	6,485,262	
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable.			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule).			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities (add lines 17 through 22)		0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ ☒ and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	3,886,261	4,066,481	
	30	Total net assets or fund balances (see instructions)	3,886,261	4,066,481	
31	Total liabilities and net assets/fund balances (see instructions) .	3,886,261	4,066,481		

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	3,886,261
2	Enter amount from Part I, line 27a	2	180,220
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3	4	4,066,481
5	Decreases not included in line 2 (itemize) ▶ _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	4,066,481

Part IV Capital Gains and Losses for Tax on Investment Income

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

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

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

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	112,277
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 { }	3	

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015	450,000	6,027,237	0 074661
2014	450,048	4,329,589	0 103947
2013	396,204	4,058,666	0 097619
2012	301,911	3,708,347	0 081414
2011	321,943	3,441,568	0 093545
2 Total of line 1, column (d)			2 0 451186
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 0 090237
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5			4 6,434,856
5 Multiply line 4 by line 3			5 580,662
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 6,702
7 Add lines 5 and 6			7 587,364
8 Enter qualifying distributions from Part XII, line 4			8 490,000

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

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

1a	Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b	1	13,404
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	
3	Add lines 1 and 2.	3	13,404
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	13,404
6	Credits/Payments		
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	4,000
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	4,000
8	Enter any penalty for underpayment of estimated tax. Check here ☒ if Form 2220 is attached	8	152
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	9,556
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10	
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ▶ Refunded ▶	11	

Part VII-A Statements Regarding Activities

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

Part 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 meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13		
14	The books are in care of HAPPY STATE BANK, HAPPY STATE BANK Telephone no (806) 349-9892			

Located at **701 S TAYLOR SUITE 200 701 S TAYLOR SUITE 200 AMARILLO TX** ZIP+4 **79101**

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

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

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

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

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

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
HAPPY STATE BANK 701 S TAYLOR SUITE 200 AMARILLO, TX 79101	TRUSTEE 2 00	27,661	0	0

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

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				

Total number of other employees paid over \$50,000. ▶

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. ▶		

Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ▶	

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	5,697,686
b	Average of monthly cash balances.	1b	835,160
c	Fair market value of all other assets (see instructions).	1c	3
d	Total (add lines 1a, b, and c).	1d	6,532,849
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	6,532,849
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	97,993
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	6,434,856
6	Minimum investment return. Enter 5% of line 5.	6	321,743

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

1	Minimum investment return from Part X, line 6.	1	321,743
2a	Tax on investment income for 2016 from Part VI, line 5.	2a	13,404
b	Income tax for 2016 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	13,404
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	308,339
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	308,339
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	308,339

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	490,000
b	Program-related investments—total from Part IX-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	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	490,000
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).	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	490,000

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				308,339
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only.				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2016				
a From 2011. 158,043				
b From 2012. 125,552				
c From 2013. 202,441				
d From 2014. 248,145				
e From 2015. 156,613				
f Total of lines 3a through e.	890,794			
4 Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ 490,000				
a Applied to 2015, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2016 distributable amount.				308,339
e Remaining amount distributed out of corpus	181,661			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,072,455			
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017				0
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).	158,043			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	914,412			
10 Analysis of line 9				
a Excess from 2012. 125,552				
b Excess from 2013. 202,441				
c Excess from 2014. 248,145				
d Excess from 2015. 156,613				
e Excess from 2016. 181,661				

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

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

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

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
b 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 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "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 investment return shown in Part X, line 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)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

1 Information Regarding Foundation Managers:

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

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

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

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

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

HAPPY STATE BANK TRUST DEPARTMENT
701 S TAYLOR
AMARILLO, TX 79101
(866) 356-8787

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

PROVIDE THE FOLLOWING NAME, ADDRESS, AND PURPOSE OF ORGANIZATION CONTACT PERSON AND PHONE NUMBER AMOUNT AND PURPOSE OF REQUEST LIST OF BOARD MEMBERS CHARITABLE STATUS OF ORGANIZATION

c Any submission deadlines

SEPTEMBER 30TH

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

HEALTH CARE RELATED

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	490,000
b <i>Approved for future payment</i>				
Total			3b	

Enter gross amounts unless otherwise indicated

(See worksheet in line 13 instructions to verify calculations)

[illegible]

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash.			No
(2) Other assets.			No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization.			No
(2) Purchases of assets from a noncharitable exempt organization.			No
(3) Rental of facilities, equipment, or other assets.			No
(4) Reimbursement arrangements.			No
(5) Loans or loan guarantees.			No
(6) Performance of services or membership or fundraising solicitations.			No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.			No
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received			

[illegible]

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

b If "Yes," complete the following schedule

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

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
	*****	2018-08-06	*****
	Signature of officer or trustee	Date	Title

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

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ☐	PTIN
	TAMMY KEENE BELCHER CPA		2018-08-06		P00283102
	Firm's name ▶ LOVELADY CHRISTY ASSOCIATES PLLC				Firm's EIN ▶ 75-2618166
	Firm's address ▶ 801 S FILLMORE ST STE 420 AMARILLO, TX 79101				Phone no (806) 373-4884

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
5,000 SH GARZA CNTY TX 6 2%	P	2012-03-29	2016-10-03
100,000 SH ENCANA CORP	P	2012-05-29	2017-01-04
1,100 SH DFA INTL CORE	P	2011-06-24	2017-02-16
6,178 SH DFA US CORE EQUITY 2	P	2011-06-24	2017-02-16
698 SH DFA EMERGING MARKETS CORE	P	2011-06-24	2017-02-16
2429 SH DFA US TARGETED VALUES	P	2011-06-24	2017-02-16
330 SH DFA REAL ESTATE SECURITIES	P	2011-06-24	2017-02-16
100,000 SH WELLS FARGO CO	P	2012-05-22	2017-05-08
15,625 DEVONSHIRE REIT I	P	2011-10-14	2017-08-31
5,000 SH GARZA CNTY	P	2012-03-29	2017-06-16

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
5,000		5,000	
101,425		99,569	1,856
13,616		12,119	1,497
120,105		68,887	51,218
13,410		14,882	-1,472
59,885		40,717	19,168
11,550		7,663	3,887
100,000		99,047	953
52,894		22,684	30,210
4,025		5,000	-975

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			1,856
			1,497
			51,218
			-1,472
			19,168
			3,887
			953
			30,210
			-975

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

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
25,000 SH GARZA CNTY	P	2012-03-29	2017-06-19
10,000 SH GARZA CNTY	P	2012-03-29	2017-06-22

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
19,063		25,000	-5,937
7,700		10,000	-2,300

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-5,937
			-2,300

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HALL COUNTY EMS AMBULANCE HALL COUNTY EMS AMBULANCE SERVICE 618 W MAIN STREET 618 W MAIN STREET MEMPHIS, TX 79245	NONE		AMBULANCE SERVICE	20,000
MATADOR MOTLEY COUNTY VOLUNTEER FIR MATADOR COUNTY VOLUNTEER FIRE DEPARTMENT 100 EUBANK ST 100 EUBANK ST MATADOR, TX 79244	NONE		VOLUNTEER FIRE DEPARTMENT	25,000
COVENANT HEALTH SYSTEM FOUNDATION COVENANT HEALTH SYSTEM FOUNDATION 3623 22ND PI 3623 22ND PI LUBBOCK, TX 79410	NONE		MEDICAL SERVICES	60,000
SILVERTON VOLUNTARY AMBULANCE SERVI SILVERTON VOLUNTARY AMBULANCE SERVICE 409 BROADWAY STREET 409 BROADWAY STREET SILVERTON, TX 79257	NONE		AMBULANCE SERVICE	30,000
SILVERTON VOLUNTARY FIRE DEPARTMENT SILVERTON VOLUNTARY FIRE DEPARTMENT 409 BROADWAY STREET 409 BROADWAY STREET SILVERTON, TX 79257	NONE		VOLUNTEER FIRE DEPARTMENT	25,000
Total ▶ 3a				490,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
VIGO PARK VOLUNTEER FIRE DEPARTMENT VIGO PARK VOLUNTEER FIRE DEPARTMENT 8901 W FM 146 8901 W FM 146 VIGO PARK, TX 79088	NONE		VOLUNTEER FIRE DEPARTMENT	10,000
CLARENDON VOLUNTEER FIRE DEPARTMENT CLARENDON VOLUNTEER FIRE DEPARTMENT 112 SOUTH SULLY STREET 112 SOUTH SULLY STREET CLARENDON, TX 79226	NONE		VOLUNTEER FIRE DEPARTMENT	25,000
SWISHER MEMORIAL HOSPITAL DISTRICT SWISHER MEMORIAL HOSPITAL DISTRICT 539 SOUTHEAST 2ND STREET 539 SOUTHEAST 2ND STREET TULIA, TX 79088	NONE		MEDICAL SERVICES	25,000
CITY OF CLAUDE FIRE DEPARTMENT CITY OF CLAUDE FIRE DEPARTMENT 115 TRICE ST PO BOX 436 PO BOX 436 CLAUDE, TX 79019	NONE		VOLUNTEER FIRE DEPARTMENT	25,000
HOSPICE SPECIAL CHARITABLE HOSPICE SPECIAL CHARITABLE PO BOX 1118 PO BOX 1118 LOCKNEY, TX 79241	NONE		MEDICAL SERVICES	10,000
Total ▶ 3a				490,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TRI COUNTRY MEALS TRI COUNTRY MEALS 117 MAIN ST 117 MAIN ST QUITAQUE, TX 79255	NONE		MEALS ON WHEELS	10,000
HEDLEY SENIOR CITIZENS ASSOCIATION HEDLEY SENIOR CITIZENS ASSOCIATION 111 MAIN ST 111 MAIN ST HEDLEY, TX 79237	NONE		SENIOR CITIZEN ASSOCIATION	10,000
MARTHA ANN COGDELL WOMEN MARTHA ANN COGDELL WOMEN'S CLUB 1600 MARTHA ANN BOULEVARD 1600 MARTHA ANN BOULEVARD SNYDER, TX 79549	NONE		RECREATION CENTER	50,000
CITY TURKEY AMBULANCE FUN CITY OF TURKEY AMBULANCE FUND 100 MAIN STREET 100 MAIN ST TURKEY, TX 79261	NONE		AMBULANCE SERVICE	20,000
CITY QUITAQUE AMBULANCE CITY OF QUITAQUE AMBULANCE SERVICE 105 1ST STREET 105 1ST STREET QUITAQUE, TX 79255	NONE		AMBULANCE SERVICE	20,000
Total ▶ 3a				490,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CAPROCK HOSPITAL DISTRICT AMBULANCE CAPROCK HOSPITAL DISTRICT AMBULANCE 901 W CORCKETT STREET 901 W CROCKETT STREET FLOYDADA, TX 792353609	NONE		AMBULANCE SERVICE	40,000
CITY OF TURKEY VOLUNTEER FIRE DEPAR CITY OF TURKEY VOLUNTEER FIRE DEPARTMENT 301 MAIN ST 301 MAIN ST TURKEY, TX 79261	NONE		VOLUNTEER FIRE DEPARTMENT	25,000
MOTLEY COUNTY AMBULANCE SERVICE MOTLEY COUNTRY AMBULANCE SERVICE 1224 MAIN ST 1224 MAIN ST MATADOR, TX 79244	NONE		AMBULANCE SERVICE	30,000
COGDELL CLINIC BRISCOE COUNTY COGDELL CLINIC BRISCOE COUNTY 701 COMMERCE ST 701 COMMERCE ST SILVERTON, TX 79257	NONE		MEDICAL SERVICES	30,000
Total ► 3a				490,000

TY 2016 Accounting Fees Schedule**Name:** MARTHA ANN COGDELL HOSPITAL TRUST**EIN:** 75-6013973

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX PREPARATION	3,475	3,475		

TY 2016 Investments Corporate Bonds Schedule

Name: MARTHA ANN COGDELL HOSPITAL TRUST

EIN: 75-6013973

Name of Bond	End of Year Book Value	End of Year Fair Market Value
100,000 AT&T INC 3.0%	99,951	101,057
100000 BALLINGER TX REF LTGO AGM	100,000	100,069
100,000 BERKSHIRE HATHAWAY FIN	100,000	103,357
100,000 BORGER TX 4.0% MUNI BOND	100,000	105,702
100,000 CATERPILLAR FIN 3.35%	100,000	102,672
100000 COCA COLA ENTRPRISES INC	99,550	102,701
55,434SH DFA INTERM GOVT FIXED INC	701,906	690,702
100,000 ENCANA CORP		
75,000 EXXON MOBIL CORP 2.709%	74,650	75,304
45,000 GARZA CNTY		
100,000 GOLDMAN SACHS BK CD	100,000	100,373
100,000 GOLDMAN SACHS GROUP MTN		
100,000 INTEL CORP 4.0%	104,143	109,604
100,000 KELLOGG CO 3.25% DUE 4/01/26	97,596	99,939
100,000 LUBBOCK TX LTGO 3.05%	99,565	101,205
50,000 MIDLOTHIAN TX CMNTY DEV	51,518	50,732
100,000 MORGAN STANLEY 3.25%	100,000	97,279
90,000 NATIONAL RURAL UTIL COOP F	89,912	91,189
100,000 NEW HOPE CULTURAL ED FAC 3.5	103,134	97,860
100,000 ORACLE CORP	104,326	100,025

Name of Bond	End of Year Book Value	End of Year Fair Market Value
75,000 PRICELINE GRP 3.55% DUE	75,932	75,128
100,000 READING PA UTGO 5.125%	101,923	107,920
100,000 SAN ANTONIO TX 3.457%	101,061	103,020
100,000 WELLS FARGO CO MTN BE		
75,000 VENTAS RLTY LTD PTR 3.5%	76,089	75,293

TY 2016 Investments Corporate Stock Schedule**Name:** MARTHA ANN COGDELL HOSPITAL TRUST**EIN:** 75-6013973

Name of Stock	End of Year Book Value	End of Year Fair Market Value
3,242 SH DFA REAL ESTATE SECURITIES	78,182	114,070
27,531 SH DFA US CORE EQUITY 2 PORT	314,498	564,942
9,808 SH DFA US TARGETED VALUE	177,781	245,004
13,414 SH DFA INTL CORE EQUITY	147,835	187,927
3,826 SH DGA EMERGING MARKETS CORE	75,910	82,976
15625 SH DEVONSHIRE REIT I		
7812.50 SH DEVONSHIRE REIT II	19,774	93,750
271.28 SH SHOP ONE CENTERS CASH	1,582	1,582
4,398.55 SHOP ONE CENTERS OP PTR	10,997	25,644

TY 2016 Other Assets Schedule

Name: MARTHA ANN COGDELL HOSPITAL TRUST

EIN: 75-6013973

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
MINERAL INTEREST	5	5	1,919,575

TY 2016 Other Expenses Schedule**Name:** MARTHA ANN COGDELL HOSPITAL TRUST**EIN:** 75-6013973**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
MINERAL LEASE OPERATING EXPEN	716	716		
OIL & GAS FEES	18,713	18,713		

TY 2016 Other Income Schedule**Name:** MARTHA ANN COGDELL HOSPITAL TRUST**EIN:** 75-6013973**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
UPTON COUNTY - MINERAL INCOME	557,403	557,403	
JPMORGAN CLASS ACTION PROCEED	51	51	

TY 2016 Taxes Schedule**Name:** MARTHA ANN COGDELL HOSPITAL TRUST**EIN:** 75-6013973

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MINERALS PRODUCTION TAX	22,977	22,977		
AD VALOREM TAX	13,333	13,333		
2017 ESTIMATED TAXES	4,000	4,000		
2016 ESTIMATED TAXES	4,594	4,594		