efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491170001068

2016

## OMB No 1545-0052

**Return of Private Foundation** 

Department of the Treasury Internal Revenue Service

Form 990-PF

or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its instructions is at <a href="www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

Open to Public Inspection

For	caler	ndar year 2016, or tax year	beginning 11-01-20	)16 , aı	nd en	ding 10-31-	2017	
		indation dation Inc				A Employer Id	entification numbe	r
La	cy roun	dation inc				58-6034851		
		street (or P O box number if mail is no vers Ferry Road	ot delivered to street address	Room/suite		<b>B</b> Telephone nu	ımber (see ınstructio	าร)
		· 				(770) 955-4122	2	
		i, state or province, country, and ZIP or 303392959	foreign postal code			<b>C</b> If exemption	application is pendin	g, check here
<b>G</b> Cl	neck al	l that apply 🔲 Initial return	$\square$ Initial return of a	former public charity		<b>D 1.</b> Foreign or	ganızatıons, check h	ere 📘 🗍
		☐ Final return	Amended return				rganizations meeting	
		Address chan	ge 🔲 Name change			·	k here and attach co	· —
			501(c)(3) exempt private				undation status was t n 507(b)(1)(A), chec	
		n 4947(a)(1) nonexempt charitable						
of	year <i>(f</i>	xet value of all assets at end from Part II, col (c), \$ 2,551,461	J Accounting method ☐ Other (specify) (Part I, column (d) must	Cash Accru	ıal		ation is in a 60-montl n 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and	Expenses (The total	(a) Revenue and				(d) Disbursements
		of amounts in columns (b), (c), and (equal the amounts in column (a) (see		expenses per books	(b) N	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc ,	received (attach					(cash basis only)
		schedule)						
	2	Check ► ✓ If the foundation is Sch B	not required to attach					
	3	Interest on savings and tempora	ry cash investments	36	5	26		
	4	Dividends and interest from secu	rities	76,402	2	76,402		
	5a	Gross rents						
a)	b	Net rental income or (loss)						
Ĭ	6a	Net gain or (loss) from sale of as	sets not on line 10					
Revenue	b	Gross sales price for all assets or	-		0			
œ	7   8	Capital gain net income (from Pa Net short-term capital gain .						
	9	Income modifications						
	10a	Gross sales less returns and allow						
	ь	Less Cost of goods sold						
	С	Gross profit or (loss) (attach scho	edule)					
	11	Other income (attach schedule)						
	12	Total. Add lines 1 through 11		76,438	В	76,428		
	13	Compensation of officers, directo	rs, trustees, etc	0		0		0
	14	Other employee salaries and wag	ges					
es	15	Pension plans, employee benefits						
ens	16a	Legal fees (attach schedule) .		648		324		324
and Administrative Expenses	b	Accounting fees (attach schedule	•	4,142	1	2,071		2,071
ve l	_ c	Other professional fees (attach s	cnedule)					
rati	17	Interest		<b>00-1</b> 407	,	487		0
ılstı	18	Taxes (attach schedule) (see inst Depreciation (attach schedule) ai	•	487	-	48/		ļ
Ē	19		na depiedon		-			
Ad	20	Occupancy	15					
pu	22	Printing and publications			1			
g G	23	Other expenses (attach schedule		150		150		0
Operating	24	Total operating and administr		_				
Dec		Add lines 13 through 23	•	5,427	,	3,032		2,395
Ō	25	Contributions, gifts, grants paid		135,000				135,000
	26	<b>Total expenses and disbursen</b> 25	nents. Add lines 24 and	140,427	,	3,032		137,395
	27	Subtract line 26 from line 12				·		
	a	Excess of revenue over expendisbursements	ses and	-63,989				
	ь	Net investment income (if neg	ative, enter -0-)			73,396		
	c	Adjusted net income(if negative	re, enter -0-)					
For	Paper	work Reduction Act Notice, see	e instructions.	1		at No 11289)	Y For	m <b>990-PF</b> (2016)

663,651

794,434

334,077

460,357

794,434

794,434

663,651

730,445

334,077

396,368

730,445

730,445

2

3

4

5

6

794,434

-63,989

730,445

730,445 Form 990-PF (2016)

0

0

2,484,667

2,551,461

disqualified persons (attach schedule) (see instructions) . . . . . Other notes and loans receivable (attach schedule)

Investments—U S and state government obligations (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . . . . . .

Less allowance for doubtful accounts ▶

Inventories for sale or use . . . . .

Prepaid expenses and deferred charges . . . . . .

Investments—land, buildings, and equipment basis ▶

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

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

Analysis of Changes in Net Assets or Fund Balances

Investments—other (attach schedule) . . . . . . .

Less accumulated depreciation (attach schedule)

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > \_

Other liabilities (describe -

Unrestricted . . .

Permanently restricted . . . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) .

Enter amount from Part I, line 27a . . . . . . . .

Other increases not included in line 2 (itemize) -

Temporarily restricted

sets	
Assel	

7

8

9

10a

b

C

11

12

13

14

15

16

17

18

19

20

21 22

23

24

25

26

28

29 Net 30

31 Part III

2

Liabilities

Balances

Fund

ŏ

Assets 27

instructions

Form 990-PF (2016)	Page <b>7</b>
Part VIII  Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	d Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "N	NONE".
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	0
Part IX-A Summary of Direct Charitable Activities	<u>,                                    </u>
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	
	4
2	$\dashv$
	+
3	+
4	
	_
Port IV D. Common of Discourse Related Towards outs (see statements)	
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	Amount
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	<u> </u>
Iotal. Add lines 1 through 3	Form <b>990-PF</b> (2016)

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

3a 3h

4

5

137.395

136.661

Form 990-PF (2016)

734

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . .

3

4

5

2016

Page 9

125,361

10,183

115,178

Form **990-PF** (2016)

0

Pa	rt	ΧI	t	ŧ

Form 990-PF (2016)									
Part XIII	Undistributed Income (see )	nstructions)							

- 1 Distributable amount for 2016 from Part XI, line 7
- 2 Undistributed income, if any, as of the end of 2016 a Enter amount for 2015 only. . . . . .

(a)

Corpus

0

0

(b)

Years prior to 2015

(c)

2015

127,212

127,212

- **b** Total for prior years
- Excess distributions carryover, if any, to 2016

- a From 2011. . . . . **b** From 2012. . . . . c From 2013. . . d From 2014. . . . . e From 2015. . . . .
- f Total of lines 3a through e. . . . . . . . 4 Qualifying distributions for 2016 from Part

XII, line 4 ▶ \$ 137,395 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 

5 Excess distributions carryover applied to 2016

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 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 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 . . . . .

(If an amount appears in column (d), the

6 Enter the net total of each column as

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

9 Excess distributions carryover to 2017.

10 Analysis of line 9

a Excess from 2012. . . **b** Excess from 2013. . c Excess from 2014. . . . d Excess from 2015. . . e Excess from 2016. . .

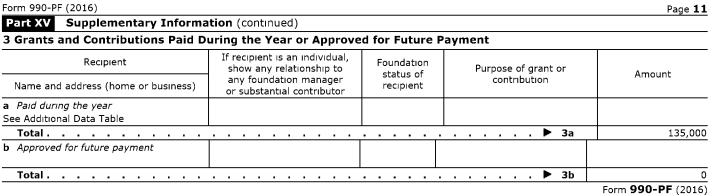
applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a . . . . . .

indicated below:

**d** Applied to 2016 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a) )



ter gross amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by section	n 512, 513, or 514	(e) Related or exempt
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions
a	Business code	Announc	Exclusion code	Allibune	
b					
c					
d e					
f					
<b>g</b> Fees and contracts from government agencies Membership dues and assessments					
Interest on savings and temporary cash investments			14	36	
Dividends and interest from securities			14	76,402	
Net rental income or (loss) from real estate					
a Debt-financed property					
Net rental income or (loss) from personal property  Other investment income					
Gain or (loss) from sales of assets other than inventory			18		
Net income or (loss) from special events			10		
Gross profit or (loss) from sales of inventory					
Other revenue a					
c					
d					
e					
Subtotal Add columns (b), (d), and (e)				76,438	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)				76,438 <b>3</b>	
Subtotal Add columns (b), (d), and (e) <b>Total.</b> Add line 12, columns (b), (d), and (e)  we worksheet in line 13 instructions to verify calculations.	ons)		1	•	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  we worksheet in line 13 instructions to verify calculations to the columns of the columns.  Relationship of Activities to the columns of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the columns.	ns )  Accomplision of the complision of the complication	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	3	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations.  Relationship of Activities to the second list of the accomplishment of the foundation's expenses.	ns )  Accomplision of the complision of the complication	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	3	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation art XVI-B  Relationship of Activities to the second s	ns )  Accomplision of the complision of the complication	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	3	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations to the columns (b).  Relationship of Activities to the columns (b).  Explain below how each activity for which the accomplishment of the foundation's explain below the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the columns (c).	ns )  Accomplision of the complision of the complication	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	3	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculation.  THE XVI-B Relationship of Activities to the second	ns )  Accomplision of the complision of the complication	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	3	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculation.  THE XVI-B Relationship of Activities to the second	ns )  Accomplision of the complision of the complication	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	3	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculation.  THE XVI-B Relationship of Activities to the second	ns )  Accomplision of the complision of the complication	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	3	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations.  Relationship of Activities to the second s	ns )  Accomplision of the complision of the complication	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	3	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations.  Relationship of Activities to the second s	ns )  Accomplision of the complision of the complication	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	3	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations.  Relationship of Activities to the second s	ns )  Accomplision of the complision of the complication	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	3	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations.  Relationship of Activities to the second s	ns )  Accomplision of the complision of the complication	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	3	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations to the columns (b).  Relationship of Activities to the columns (b).  Explain below how each activity for which the accomplishment of the foundation's explain below the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the columns (c).	ns )  Accomplision of the complision of the complication	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	3	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation art XVI-B  Relationship of Activities to the second s	ns )  Accomplision of the complision of the complication	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	3	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation art XVI-B  Relationship of Activities to the second s	ns )  Accomplision of the complision of the complication	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	3	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations to the columns (b).  Relationship of Activities to the columns (b).  Explain below how each activity for which the accomplishment of the foundation's explain below the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the columns (c).	ns )  Accomplision of the complision of the complication	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	3	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation art XVI-B  Relationship of Activities to the second s	ns )  Accomplision of the complision of the complication	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	3	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations to the columns (b).  Relationship of Activities to the columns (b).  Explain below how each activity for which the accomplishment of the foundation's explain below the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the columns (c).	ns )  Accomplision of the complision of the complication	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	3	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations to the columns (b).  Relationship of Activities to the columns (b).  Explain below how each activity for which the accomplishment of the foundation's explain below the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the columns (c).	ns )  Accomplision of the complision of the complication	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	3	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation art XVI-B  Relationship of Activities to the second s	ns )  Accomplision of the complision of the complication	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	3	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations to the columns (b).  Relationship of Activities to the columns (b).  Explain below how each activity for which the accomplishment of the foundation's explain below the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the columns (c).	ns )  Accomplision of the complision of the complication	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	3	76,438
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation art XVI-B  Relationship of Activities to the second s	ns )  Accomplision of the complision of the complication	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	3	

Page **13** 

Part XVII

Exempt Organizations

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

		— Excilipt Organii	Lucions										
		rganization directly or in Code (other than sectio								ion 501		Yes	No
а	Transfers	from the reporting foun	dation to a no	oncha	ırıtable exe	empt organizatioi	n of						
	(1) Cash	1								.	1a(1)		No
(2) Other assets											1a(2)		No
<b>b</b> Other transactions													
	(1) Sales of assets to a noncharitable exempt organization										1b(1)		No
	(2) Purchases of assets from a noncharitable exempt organization										1b(2)		No
	( <b>3</b> ) Rent	tal of facilities, equipmer	nt, or other as	sets.							1b(3)		No
	<b>(4)</b> Rein	nbursement arrangemen	ts							.	1b(4)		No
	( <b>5</b> ) Loar	ns or loan guarantees.									1b(5)		No
	(6) Perfo	rmance of services or m	embership or	fund	raising sol	icitations				.	1b(6)		No
С	Sharing o	of facilities, equipment, n	nailing lists, o	ther a	assets, or	paid employees.				.	1c		No
	of the go	swer to any of the above ods, other assets, or ser ansaction or sharing arra	vices given by	y the	reporting	foundation If the	e fou	ındation received	d less than fair ma	rket value			
(a)	Line No	(b) Amount involved	(c) Name of I	noncha	arıtable exe	mpt organization	(	(d) Description of t	ransfers, transactions	s, and shar	ıng arrar	ngemen	ts
	+												
	+												
	described	undation directly or indire I in section 501(c) of the complete the following so (a) Name of organizatio	Code (other		section 50	*	ction	, ,			Yes	<b>☑</b> N	0
									-				
Sid	of r	der penalties of perjury, ny knowledge and belief ich preparer has any kno	, it is true, co	I hav	l ve examın , and com <sub>l</sub>	ed this return, in plete Declaration	cludi of p	Ing accompanyir preparer (other t	ng schedules and s than taxpayer) is b	statement based on	s, and t	o the I	best of
	ere 👠	*****	-		I	2018-06-04		*****		May the IF			
	)	Signature of officer or to	rustee			Date		Title		with the pi			
		Print/Type preparer's		Prepa	arer's Sıgr	nature	D	ate	Check if self- employed ▶ □	PTIN	P01294	629	
Pa Pr	id epare	Stuart Alan Jackso	n Jackson Grou	ח פר				2018-06-04	•				
	e Only	Third harrier the	Jackson Glou	PPC						Firm's El	IN ▶58-	17073	86
		Firm's address ► 19	1 Peachtree S		Ste 3720					Phone no	o (404)	586-0	0050
	Atlanta, GA 30303												

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation David M Lacy Sr Chairman 1 00 6151 Powers Ferry Rd Ste 520 Atlanta, GA 30339 Douglas F Lacv Vice-Chairman & COO 1 00 6151 Powers Ferry Rd Ste 520 Atlanta, GA 30339 Lvnda L Ramseur Treasurer O 0 1.00 6151 Powers Ferry Rd Ste 520 Atlanta, GA 30339 William Linkous Jr. Secretary ٥ 1 00 6151 Powers Ferry Rd Ste 520 Atlanta, GA 30339 Carol Lacy Asst Secretary 1 00 6151 Powers Ferry Rd Ste 520 Atlanta, GA 30339

Trustee 1 00

JoAnn U Lacy

Atlanta, GA 30339

6151 Powers Ferry Rd Ste 520

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

	Show any relationship to	Status Oi	Contribution	
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
Alzheimer's Assoc - GA Chapter P O Box 96011 Washington, DC 200906011	N/A	PC	Athens Memory Walk	2,0

Alzheimer's Assoc - GA Chapter P O Box 96011 Washington, DC 200906011	N/A	PC	Athens Memory Walk	2,000
Bullseye Rescue Inc 1819 Leiden Ct Atlanta, GA 30338	N/A	PC	To assist in the rescue and re- homing process of strays,	1,500

Bullseye Rescue Inc 1819 Leiden Ct Atlanta, GA 30338	N/A	PC	To assist in the rescue and re- homing process of strays, surrendered, and sheltered dogs	1,500
Calcutta Mercy Ministries 3945 S Wasatch Blvd 311 Salt Lake City, UT 84124	N/A	PC	To feed, educate, and medically assist the poor of Calcutta, India	2,500

			surrendered, and sheltered dogs	
Calcutta Mercy Ministries 3945 S Wasatch Blvd 311 Salt Lake City, UT 84124	N/A	PC	To feed, educate, and medically assist the poor of Calcutta, India	2,500
Cashiers-Highlands Humane Society P O Box 638 Cashiers, NC 28717	N/A	PC	Annual support for animal rescue	10,000
CLUL LULBU CAUL LEDN	21/2	50	5 1 1 10	1 500

3945 S Wasatch Blvd 311 Salt Lake City, UT 84124			assist the poor of Calcutta, India	
Cashiers-Highlands Humane Society P O Box 638 Cashiers, NC 28717	N/A	PC	Annual support for animal rescue	10,000
Children's Healthcare of Atlanta FDN 1687 Tullie Circle NE Atlanta, GA 30329	N/A	PC	Pediatric healthcare	1,500

Sale Lake City, or OTIL				
Cashiers-Highlands Humane Society P O Box 638 Cashiers, NC 28717	N/A	PC	Annual support for animal rescue	10,000
Children's Healthcare of Atlanta FDN 1687 Tullie Circle NE Atlanta, GA 30329	N/A	PC	Pediatric healthcare	1,500
			_	

P O Box 638 Cashiers, NC 28717				
Children's Healthcare of Atlanta FDN 1687 Tullie Circle NE Atlanta, GA 30329	N/A	PC	Pediatric healthcare	1,500
Total				135,000

За

If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
any foundation manager or substantial contributor	recipient		
N/A	PC	To preserve the Appalachian mountains	3,500
N/A	PC	To help reduce abandoned pets in Pike County	7,000
N/A	PC	Annual fund	20,000
N/A	PC	General program fund	5,000
N/A	PC	To help end domestic violence	1,000
	show any relationship to any foundation manager or substantial contributor  N/A  N/A  N/A  N/A	show any relationship to any foundation manager or substantial contributor  N/A  PC  N/A  PC  N/A  PC  N/A  PC	show any relationship to any foundation manager or substantial contributor  N/A  PC  To preserve the Appalachian mountains  N/A  PC  To help reduce abandoned pets in Pike County  N/A  PC  Annual fund  N/A  PC  General program fund

За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year First Presbyterian of Highlands N/A PC General ministry fund 20,000 471 Main Street Highlands, NC 28741

Flint Riverkeeper P O Box 468 N/A PC To protect Flint River in So GA	uth	7,000
Genuine Indian Relic Society Inc PO Box 694 Robinson, IL 624540694  N/A PC To educate the public in generating about fraudulent American Indian artifacts		1,000

Genuine Indian Relic Society Inc PO Box 694 Robinson, IL 624540694	N/A	PC	To educate the public in general about fraudulent American Indian artifacts	1,000
Greater Yellowstone Coalition PO Box 1874 Bozeman, MT 59771	N/A	PC	Protect the Greater Yellowstone Ecosystem	2,500
Haygood Memorial UMC	N/A	PC	Moulder Memorial Fund	500

Greater Yellowstone Coalition PO Box 1874 Bozeman, MT 59771	N/A	PC	Protect the Greater Yellowstone Ecosystem	2,5
Haygood Memorial UMC 1015 East Rock Springs Road NE Atlanta, GA 30306	N/A	PC	Moulder Memorial Fund	5

Greater Yellowstone Coalition PO Box 1874 Bozeman, MT 59771	N/A	PC	Protect the Greater Yellowstone Ecosystem	2,
Haygood Memorial UMC 1015 East Rock Springs Road NE	N/A	PC	Moulder Memorial Fund	

3a

Bozeman, Mi 39771				
Haygood Memorial UMC 1015 East Rock Springs Road NE Atlanta, GA 30306	N/A	PC	Moulder Memorial Fund	500
Total				135,000

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	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
Highlands-Cashiers Hospital Foundation P O Box 742 Highlands, NC 28741	N/A	PC	General hospital support	10,000
Journey Church of Griffin P O Box 654 Williamson, GA 30292	N/A	PC	Don Hulon's "Southern Exposure" (prior year check returned)	2,500
Kennesaw State University Foundation Inc 1000 Chastain Road Kennesaw, GA 301445588	N/A	PC	General funds	5,000
Lighthouse Lymphedema Network 10240 Crescent Ridge Dr Roswell, GA 30076	N/A	PC	To educate and create awareness about lymphedema and related disorders	1,000
Lovett School The 4075 Paces Ferry Rd NW Atlanta, GA 30327	N/A	PC	Financial Aid Fund	7,500
Total				135,000

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	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
Mission Dawgs Inc 703 Ruby St Marietta, GA 30066	N/A	PC	Homeless outreach	2,000
Must Ministries P O Box 1717 Marietta, GA 30061	N/A	PC	Serve neighbors in need and transform lives in response to Christ's call	1,000
Northside Athletes FDN 800 Mt Vernon Hwy Ste 200 Atlanta, GA 30328	N/A	PC	Benefit Atlanta area youth athletic programs	1,000
PAWS Atlanta Inc 5287 Covington Hwy Decatur, GA 300352202	N/A	PC	To promote responsible pet care and enhance the pet-human bond	2,000
Peggy Crosby Community Service Center	N/A	PC	Providing affordable office space to organizations who offer	1,000

Atlanta, GA 30328			athletic programs	
PAWS Atlanta Inc 5287 Covington Hwy Decatur, GA 300352202	N/A	PC	To promote responsible pet care and enhance the pet-human bond	2,000
Peggy Crosby Community Service Center 348 S 5th St	N/A	PC	Providing affordable office space to organizations who offer community services	1,000

Highlands, NC 28741 135,000

За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year Piedmont Healthcare Edn N/A PC General funds 2,000 2001 Peachtree Rd NE Atlanta, GA 30309 N/A PC For old Zebulon school 2,500 Pike Historic Preservation Inc. 1737 Chapman Rd restoration

Zebulon, GA 30295				
Samaritan's Purse P O Box 3000 Boone, NC 28607	N/A	PC	To provide spiritual and physical aid to hurting people around the world	2,500
Save Georgia's Hemlocks 37 Woody Bend Dahlonega, GA 30533	N/A	PC	To save hemlocks from extinction	1,000
Schenck School Inc	N/A	PC	Capital Campaign	2.500

Dahlonega, GA 30533			extinction	
Schenck School Inc 282 Mt Paran Road NW	N/A	PC	Capital Campaign	2,5

Atlanta, GA 30327 Total . 135,000

3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year Shepard Center Foundation N/A PC General rehabilitation support 1,000 2020 Peachtree Rd NW Atlanta, GA 30309 N/A PC Special Olympics Georgia Annual support 1,000 4000 Dekalb Technology Pkwy Ste 400 Atlanta, GA 303405668 St Anne's Terrace-Anne's Purse N/A PC 1,000 Not-for-profit retirement 3100 Northside Pkwv NW community Atlanta, GA 30327 N/A PC 1,000 St Jude Children's Hospital Advance cures for pediatric 501 St Jude Place diseases Memphis. TN 38105

PC

General support

1,500

135,000

St Benedict's Episcopal Church

2160 Cooper Lake Rd SE Smyrna, GA 30080

3a

N/A

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

Name and dadress (nome or business)	or substantial contributor			
a Paid during the year				
Sweet Grass Health & Wellness FDN P O Box 1614 Big Timber, MT 59011	N/A	PC	To strengthen community, promote well-being, and improve health	1,000

За

Total . 135,000

efile GRAPHIC print - DO NOT P	ROCESS	As Filed Data	-	D	LN: 93491170001068	
TY 2016 Accounting Fees Schedule						
	Name:	Lacy Founda	ation Inc			
<b>EIN:</b> 58-6034851						
1						
Category	Amo	ount N	et Investment	Adjusted Net	Disbursements	
			Income	Income	for Charitable	
					Purposes	

4,142

The Jackson Group PC

2,071

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491170001068

## **TY 2016 Investments Corporate Stock Schedule**

Name: Lacy Foundation Inc

ETN: 58-603/851

<b>EIN:</b> 58-6034851					
Name of Stock	End of Year Book Value	End of Year Fair Market Value			
Abbott Labs - 1500 sh	31,883	81,345			
Abbvie Inc - 1000 sh	12,691	90,250			
Amgen Inc - 400sh	50,479	70,088			
Chevron Corp - 1200sh	4,408	139,068			
Coca Cola - 3000sh	6,129	137,940			
ConocoPhillips - 800sh	35,706	40,920			
CVS Health Corp - 1000sh	51,128	68,530			
Exxon Mobil - 6000sh	21,364	500,100			
GE - 1000sh	36,564	20,160			
Johnson & Johnson - 1000sh	73,064	139,410			
PepsıCo - 6000sh	7,721	661,380			
Phillips 66 - 400sh	11,260	36,432			
Proctor & Gamble - 1000sh	56,740	86,340			
Southern Co 2500sh	27,202	130,500			
Suncor Inc - 1000sh	32,067	33,960			
Teva Pharma - 1500sh	73,857	20,700			
Trınıty Industries - 1000sh	36,559	32,520			
UnitedHealth Group - 700sh	67,410	147,154			
Verizon Comm 1000sh	27,419	47,870			

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	DLN: 93491170001068		
TY 2016 Legal Fees Schedu	ule			
Nar	me: Lacy Founda	ition Inc		
<b>EIN:</b> 58-6034851				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Bryan Cave	648	324		324

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491170001068		
TY 2016 Other Expenses Schedule						
Name	: Lacy Foundatio	n Inc				
EIN	<b>:</b> 58-6034851					
Other Expenses Schedule				1		
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		

Brokerage Fee

efile GRAPHIC print - DO NOT PROCESS	S As Filed Data -	-	DLI	N: 93491170001068	
TY 2016 Taxes Schedule					
				l	
Name: Lacy Foundation Inc EIN: 58-6034851					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	

Foreign Tax Withheld