∞



Department of the Treasury Internal Revenue Service Return of Private Foundation 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. ► Go to www.irs.gov/Form990PF for instructions and the latest information

2017

OMB No 1545-0052

Open to Public Inspection

For cale	endar year 2017 or tax year beginning	, 2017,	and ending	,,	 -
G3.DD	TOOK DANTEN POUNDAMION		14	A Employer identification num	nber
	ISON FAMILY FOUNDATION		<u> </u>	20-4886012 B Telephone number (see insti	ruotions)
	AURORA ESHOE BAY, TX 78657		["	830-596-3678	ructions)
110105	LSHOL BAI, IA 70037		-	030 330 3070	
			•	C If exemption application is	pending, check here
G Che	ck all that apply Initial return	Initial return of a form	ner public charity	D 1 Foreign organizations, chec	li hara
	Final return	Amended return	'	r roreigh organizations, thet	K liele
	Address change	Name change	. (2 Foreign organizations meet	
H Che	ck type of organization: X Section 501	(c)(3) exempt private f	oundation	here and attach computation	in • 📗
Γ	Section 4947(a)(1) nonexempt charitable to			E If private foundation status	was terminated
1 Fair		ounting method. X C		under section 507(b)(1)(A)	, check here.
(froi		Other (specify)	<u> </u>	F If the foundation is in a 60	month termination —
▶ \$		column (d) must be or		under section 507(b)(1)(B)	
Part I		(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in	expenses per books	income	income	for charitable
	columns (b), (c), and (d) may not neces- sarily equal the amounts in column (a)				purposes
`	(see instructions).)				(cash basis only)
	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check ► X if the foundation is not required to attach Sch B				
,		101 500	101 50	101 500	
t	3 Interest on savings and temporary cash investments 4 Dividends and interest from securities	<u>181,500.</u>	181,500		
1	5 a Gross rents	351,678.	351,678	351,678.	
	b Net rental income				
D	or (loss). 6 a Net gain or (loss) from sale of assets not on line 10	410,230.			
R E	b Gross sales price for all	410,230.			
E	assets on line 6a 4, 931, 304. 7 Capital gain net income (from Part IV, line 2)		410,230	<u></u>	
E N	8 Net short-term capital gain.		410,230	48, 953.	
ΰ	9 Income modifications			1 40,933	
Ε -	10 a Gross sales less returns and		· · · · · · · · · · · · · · · · · · ·	- 	<u> </u>
	allowances				
i	b Less Cost of goods sold				·. ·
	€ Gross profit or (loss) (attach schedule)			1	
	11 Other income (attach schedule)				
	See Statement 1	<u>8,032.</u>	8,032		
	12 Total. Add lines 1 through 11	951,440.	951,440	590,163.	
	Compensation of officers, directors, trustees, etc	0.			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
A D	16a Legal fees (attach schedule) b Accounting fees (attach sch) See St 2	1 (00	1 600	1 600	
M	b Accounting fees (attach sch) See St 2 c Other professional fees (attach sch) See St 3	1,600.	1,600	1,600.	
Q. N		77,851.	77,85		ļ -
O, Î	17 Interest 18 Taxes (attach schedule)(see instrs) See Stm 4	9,456. 6,332.	9,456 6,332		
E, T	19 Depreciation (attach	6,332.	6,334	6,332.	
A A	schedule) and depletion				
N V	20 Occupancy			 	<u> </u>
G E	21 Travel, conferences, and meetings	4,863.	4,863	4,863.	
A E N X D P	22 Printing and publications				
	23 Other expenses (attach schedule)	4.5			
, E N S	See Statement 5	45.	4:	5. 45.	
S E	24 Total operating and administrative expenses. Add lines 13 through 23	100,147.	100 14	7 100 147	
S	25 Contributions, gifts, grants paid Part XV	1,012,700.	100,14	7. 100,147.	1,012,700.
	26 Total expenses and disbursements.	1,014,700.		 	1,014,700.
	Add lines 24 and 25	1,112,847.	100,14	7. 100,147.	1,012,700.
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses	1.01 400			
	and disbursements	-161,407.	053 000		
	b Net investment income (if negative, enter -0-)		851,293		
	C Adjusted net income (if negative, enter -0-)		1	490,016.	l i

2 2 Enter amount from Part I, line 27a -161,407. 3 Other increases not included in line 2 (itemize) See Statement 10 1,248. 4 Add lines 1, 2, and 3 14,597,655. 5 Decreases not included in line 2 (itemize) ► See Statement 11 6,000. Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 6 14,591,655.

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.

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

Enter qualifying distributions from Part XII, line 4

8,513.

1,037,397.

1,012,700.

6

7

Add lines 5 and 6

396-PF (2017) GARRISON FAMILY FOUNDATION	20-4886012		Р	age 4
Excise Tax Based on Investment Income (Section 4940		ıs)		
· · · · ·	d enter 'N/A' on line 1.			'
Date of ruling or determination letter: (attach copy of letter if nece	• •			
b Domestic foundations that meet the section 4940(e) requirements in Part	v,		17,C	26.
check here. ►and enter 1% of Part I, line 27b				:
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			0.
3 Add lines 1 and 2	3		17,C	26.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable for				0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or le	ess, enter -0-		<u> 17,0</u>	<u> 26.</u>
6 Credits/Payments:				!
a 2017 estimated tax pmts and 2016 overpayment credited to 2017	6a 10,286.			
b Exempt foreign organizations — tax withheld at source	6 b			
c Tax paid with application for extension of time to file (Form 8868)	6 c			
d Backup withholding erroneously withheld	6 d			
7 Total credits and payments. Add lines 6a through 6d	7		10,2	
8 Enter any penalty for underpayment of estimated tax. Check here X if F	Form 2220 is attached 8			<u>217.</u>
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ 9		6, 9	<u>57.</u>
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶ 10			
Enter the amount of line 10 to be: Credited to 2018 estimated tax	Refunded > 11			
Part VII-A Statements Regarding Activities				
1 a During the tax year, did the foundation attempt to influence any national,	state, or local legislation or did it	<u> </u>	Yes	No
participate or intervene in any political campaign?		1 a		<u>X</u>
b Did it spend more than \$100 during the year (either directly or indirectly) for pol	itical purposes?			
See the instructions for the definition		1 b		X
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.				
c Did the foundation file Form 1120-POL for this year?	and the constant	1 c		_X_
d Enter the amount (if any) of tax on political expenditures (section 4955) in (1) On the foundation • \$ 0. (2) On foundation) ;
e Enter the reimbursement (if any) paid by the foundation during the year for politic		- [i
foundation managers. >\$ 0.	·	1		
2 Has the foundation engaged in any activities that have not previously been	n reported to the IRS?	2		X
If 'Yes,' attach a detailed description of the activities.				
3 Has the foundation made any changes, not previously reported to the IRS, in its	anverning instrument articles	1 1		
of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a	conformed copy of the changes	3		X
4a Did the foundation have unrelated business gross income of \$1,000 or mo	re during the year?	4 a		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		4 b	N,	/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
If 'Yes,' attach the statement required by General Instruction T.				
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 relating to the state of t	on mandatory directions that conflict			
with the state law remain in the governing instrument?	io mandatory directions that connec	6	Х	-
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete	e Part II, col (c), and Part XV	7	X	
8 a Enter the states to which the foundation reports or with which it is register				
N/A				
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Atto	rney General			
(or designate) of each state as required by <i>General Instruction G?</i> If 'No,' attach explanation	They deficial	8 b	Х	
9 Is the foundation claiming status as a private operating foundation within	the meaning of section 4942(i)(3) or 4942(i)(5)			,
9 Is the foundation claiming status as a private operating foundation within for calendar year 2017 or the tax year beginning in 2017? See the instruct	tions for Part XIV. If 'Yes,' complete Part XIV	9		X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' a				
and addresses		10		X
AA	F	orm 990)-PF (2	2017)

_		
	► 20 , 20 , 20 , 20	
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Ye
b	olf 'Yes,' did it have excess business holdings in 2017 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 approve 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 2017.)	ed

 $\bf 4\,a$ Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

ιb	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
1	the tax year beginning in 2017?

Form 990-PF (2017)

3 b

4 a

N/A

990 PF (2017) GARRISON FAMILY FO				48860	12	P	age 6
VLB Statements Regarding Activiti		4720 May Be Req	uired (continue	d)	, ,	 –	
During the year, did the foundation pay or incur at (1) Carry on propaganda, or otherwise attempt	•	n (costion AQAE(o))2	ΠVaa	₩.	-	Yes	No
(2) Influence the outcome of any specific public	lic election (see section	` ' ' '	Yes	X No			
on, directly or indirectly, any voter registra (3) Provide a grant to an individual for travel,		purposes?	Yes	X No			
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? See instructions		zation described	Yes	X No			
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	, literary, or or animals?	Yes	X No			
b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53.4945 or in a case instructions	the transactions fail to current notice regarding of	qualify under the excep lisaster assistance?	ptions		5 b	Ñ	/Ā
Organizations relying on a current notice rega	rding disaster assistant	ce, check here	•	- [
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respons	sibility for the grant?	·	N/A Yes	☐ No			
If 'Yes,' attach the statement required by Regu		• •					
6 a Did the foundation, during the year, receive ar on a personal benefit contract?b Did the foundation, during the year, pay premi			Yes	XNo	6 b		- -
If 'Yes' to 6b, file Form 8870.	idins, directly of mance	ily, on a personal bene	in contract.		00		X
7a At any time during the tax year, was the found	dation a party to a proh	ibited tax shelter transa	action? Yes	XNo			
b If 'Yes,' did the foundation receive any procee	ds or have any net inco	ome attributable to the t	transaction?	N/A	7ь		
Part VIII Information About Officers, Dand Contractors	irectors, Trustees,	Foundation Manag	gers, Highly Pa	id Emp	loyees	5,	
1 List all officers, directors, trustees, and found	dation managers and the	neir compensation. See	instructions.				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions employee bend plans and defer compensation	efit (e) rred	Expens other a		
See Statement 13							-
		0.		0.			 0.
							_
2 Compensation of five highest-paid employees (of	ther than those included	on line 1 — see instruction	ns). If none, enter 'N	ONE.			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions employee bene plans and defer compensation	efit (e) red (Expens other a	e acci llowar	ount, ices
None							
1							
	ļ	ļ					
				_			
					_		
Total number of other employees paid over \$50,000)			•			0

Form **990-PF** (2017)

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 1 a 19,985,325. b Average of monthly cash balances 1 b 668,607. c Fair market value of all other assets (see instructions) 1 c 1 d d Total (add lines 1a, b, and c) 20,653,932. e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1 e 0. Acquisition indebtedness applicable to line 1 assets 2 Subtract line 2 from line 1d 3 20,653 932. Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions) 4 309,809 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4 20,344,123. Minimum investment return. Enter 5% of line 5 6 1,017,206. 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.) Minimum investment return from Part X, line 6 1 1,017,206. 2a Tax on investment income for 2017 from Part VI, line 5 2a 17,026 . b Income tax for 2017 (This does not include the tax from Part VI) 2 b c Add lines 2a and 2b. 20 17,026. 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 1,000,180. Recoveries of amounts treated as qualifying distributions 4 5 1,000,180. 6 Deduction from distributable amount (see instructions) Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 1,000,180 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1 a 1,012,700. 1 b b Program-related investments - total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3 a 3 b **b** Cash distribution test (attach the required schedule). Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 1,012,700. 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 Adjusted qualifying distributions. Subtract line 5 from line 4 6 1,012,700. 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.

BAA

Form **990-PF** (2017)

Though XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				1,000,180.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only		~	319,017.	
b Total for prior years: 20 , 20 _ , 20		0.		
3 Excess distributions carryover, if any, to 2017.				
a From 2012				
b From 2013				
c From 2014				
d From 2015				
e From 2016				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2017 from Part				
XII, line 4· ► \$ 1,012,700.	'			
a Applied to 2016, but not more than line 2a			319,017.	
b Applied to undistributed income of prior years				
(Élection required – see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount				693,683.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the	0.			0.
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	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed				
income for which a notice of deficiency has been issued, or on which the section 4942(a)				
tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount — see instructions		0.		
e Undistributed income for 2016. Subtract line 4a from				
line 2a. Taxable amount — see instructions			0.	
f Undistributed income for 2017 Subtract lines				
4d and 5 from line 1. This amount must be				
distributed in 2018				306,497.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by				1
section 170(b)(1)(F) or 4942(g)(3) (Election				,
may be required - see instructions).	0.			
8 Excess distributions carryover from 2012 not				
applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9.				
a Excess from 2013				
b Excess from 2014				
c Excess from 2015				
d Excess from 2016				
e Excess from 2017				

990-PF (2017) GARRISON FAMILY I				20-4886012	
Private Operating Foundat				<u></u>	N/A
is of the foundation has received a ruling or dete is effective for 2017, enter the date of the	rmination letter that i ruling	t is a private operati	ing foundation, and th	ne ruling	/
b Check box to indicate whether the foundat	•	rating foundation d	lescribed in section	4942(j)(3) or	×4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	4	(e) Total
investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014 //	
each year listed. 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.					
 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	ļ		<u>/</u>		
(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	nart only if the	foundation had	\$5 000 ar mara	<u> </u>
assets at any time during th	e vear – see in:	structions.)	Touridation nad	1 \$5,000 01 111016	111
1 Information Regarding Foundation Management					
a List any managers of the foundation who have close of any tax year (but only if they have	e contributed more the	an 2% of the total co	ontributions received	by the foundation bef	ore the
None	e contributed more	man \$5,000). (See	Section 507 (a)(2).)		
b List any managers of the foundation who own a partnership or other entity) of which the	10% or more of the foundation has a 10	stock of a corporation	on (or an equally large	e portion of the owner	ship of
None		9. va.v			
2 Information Regarding Contribution, Grant,	Gift, Loan, Scholarsh	nip, etc., Programs:			
Check here ► ☐ If the foundation only ma			le organizations and	does not accept unso	icited
 requests for funds. If the foundation make 2a, b, c, and d. See instructions. 	s gifts, grants, etc	to individuals or or	ganizations under o	other conditions, con	nplete items
a The name, address, and telephone number o	r email address of the	e person to whom ap	oplications should be	addressed.	-
See Statement 14					
b The form in which applications should be	submitted and infor	mation and materia	als they should inclu	ıde	
' See Statement for Line 2a					
c Any submission deadlines:					
Con Statement for Time 3					
See Statement for Line 2a d Any restrictions or limitations on awards,	such as by geograp	hical areas, charita	able fields, kinds of	institutions, or other	factors:
· Con Charles of Carlos					
See Statement for Line 2a		5A03101 0031415			orm 996 BE /2017\
BAA	TE	EA0310L 09/14/17		F	orm 990-PF (2017)

BAA

Total

▶ 3ь

·	Framewate unless otherwise indicated		1 husiness issains	Frankright 4.1	anation E10 F10 F14	
, 1 Jr08	s amounts unless otherwise indicated		business income		section 512, 513, or 514	- (¢)
		(a) Business	(b) Amount	(c) Exclu-	(d) Amount	Related or exempt function income
1 Dros	WATER BOTHER FOLIOPING	code	Amount	รเอก	Amount	(See instructions)
_	jram service revenue	 		code		
å		 				
b		 				
<u></u>		 				 -
<u>"</u>		+				
·		 				
a Fee	s and contracts from government agencies	 				
_	bership dues and assessments	 +		+ - +-		
	est on savings and temporary cash investments					101 500
	dends and interest from securities			-+		181,500. 351,678.
	rental income or (loss) from real estate	 		+		351,6/8.
	t-financed property	 		- -		<u> </u>
	debt-financed property	 				
	ental income or (loss) from personal property	 				
	er investment income	 	 			0.032
-	or (loss) from sales of assets other than inventory	 	·	+ - + -		8,032. 410,230.
	income or (loss) from special events			++		410,230.
	ss profit or (loss) from sales of inventory	 		+		
	er revenue	 		++-		
a	Si revenue	 				
ь		 		- - - - - - - - - - 		
Б		+				
ď						
"		 		-}+-		
· · ·		 				<u> </u>
12 Sub	total Add columns (h) (d) and (e)	[[1 1		051 440
	total. Add columns (b), (d), and (e)			<u> </u>	12	951,440.
13 Tota	al. Add line 12, columns (b), (d), and (e)	ODE)			13	951,440. 951,440.
13 Tota (See work	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculate		shmont of Evan	nt Burnos		
13 Tota (See work Part XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate (I-B Relationship of Activities to the	e Accompli		<u> </u>	es	951,440.
13 Tota (See work	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculate in the Relationship of Activities to the Explain below how each activity for which is	Accompli	rted in column (e) o	f Part XVI-A	es	951,440.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate (I-B Relationship of Activities to the	Accompli	rted in column (e) o	f Part XVI-A	es	951,440.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculate in the Relationship of Activities to the Explain below how each activity for which is	Accompli	rted in column (e) o	f Part XVI-A	es	951,440.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculate in the Relationship of Activities to the Explain below how each activity for which is	Accompli	rted in column (e) o	f Part XVI-A	es	951,440.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculate in the Relationship of Activities to the Explain below how each activity for which is	Accompli	rted in column (e) o	f Part XVI-A	es	951, 440 .
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculate in the Relationship of Activities to the Explain below how each activity for which is	Accompli	rted in column (e) o	f Part XVI-A	es	951, 440 .
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculate in the Relationship of Activities to the Explain below how each activity for which is	Accompli	rted in column (e) o	f Part XVI-A	es	951, 440 .
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculate in the Relationship of Activities to the Explain below how each activity for which is	Accompli	rted in column (e) o	f Part XVI-A	es	951, 440 .
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculate in the Relationship of Activities to the Explain below how each activity for which is	Accompli	rted in column (e) o	f Part XVI-A	es	951, 440 .
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculate in the Relationship of Activities to the Explain below how each activity for which is	Accompli	rted in column (e) o	f Part XVI-A	es	951, 440 .
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculate in the Relationship of Activities to the Explain below how each activity for which is	Accompli	rted in column (e) o	f Part XVI-A	es	951, 440 .
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculate in the Relationship of Activities to the Explain below how each activity for which is	Accompli	rted in column (e) o	f Part XVI-A	es	951, 440 .
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculate in the Relationship of Activities to the Explain below how each activity for which is	Accompli	rted in column (e) o	f Part XVI-A	es	951, 440 .
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculate in the Relationship of Activities to the Explain below how each activity for which is	Accompli	rted in column (e) o	f Part XVI-A	es	951, 440 .
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculate in the Relationship of Activities to the Explain below how each activity for which is	Accompli	rted in column (e) o	f Part XVI-A	es	951, 440 .
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculate in the Relationship of Activities to the Explain below how each activity for which is	Accompli	rted in column (e) o	f Part XVI-A	es	951, 440 .
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculate in the Relationship of Activities to the Explain below how each activity for which is	Accompli	rted in column (e) o	f Part XVI-A	es	951, 440 .
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculate in the Relationship of Activities to the Explain below how each activity for which is	Accompli	rted in column (e) o	f Part XVI-A	es	951,440.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculate in the Relationship of Activities to the Explain below how each activity for which is	Accompli	rted in column (e) o	f Part XVI-A	es	951, 440 .
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculate in the Relationship of Activities to the Explain below how each activity for which is	Accompli	rted in column (e) o	f Part XVI-A	es	951, 440 .
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculate in the Relationship of Activities to the Explain below how each activity for which is	Accompli	rted in column (e) o	f Part XVI-A	es	951, 440 .
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculate in the Relationship of Activities to the Explain below how each activity for which is	Accompli	rted in column (e) o	f Part XVI-A	es	951,440.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculate in the Relationship of Activities to the Explain below how each activity for which is	Accompli	rted in column (e) o	f Part XVI-A	es	951,440.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculate in the Relationship of Activities to the Explain below how each activity for which is	Accompli	rted in column (e) o	f Part XVI-A	es	951,440.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculate in the Relationship of Activities to the Explain below how each activity for which is	Accompli	rted in column (e) o	f Part XVI-A	es	951,440.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculate in the Relationship of Activities to the Explain below how each activity for which is	Accompli	rted in column (e) o	f Part XVI-A	es	951,440.

									Yes	No
d	id the organization directly escribed in section 501(c) elating to political organiza	of the Code (of	ngage in any of ther than section	the following w 501(c)(3) orga	ith any of anizations	ther organization) or in section 5	n 527,	_	res	NO
	ransfers from the reporting		a noncharitable	exempt organi	zation of.					-
) Cash.	,						1 a (1)	-1	X
•	Other assets							1 a (2)		X
	ther transactions.									
) Sales of assets to a nor	ocharitable exe	mpt organization	า				16(1)		X
•	Purchases of assets fro				•	•		1 b (2)		X
•	Rental of facilities, equi		. •		,		•	1 b (3)		X
•	 Reimbursement arrange 	•			•	• •	•••	1 b (4)		<u> </u>
1	•			•		• •	• •			$\frac{\hat{x}}{x}$
	5) Loans or loan guarantee			. aaliaitatiana	•	•		1 b (5)		
	Performance of services		-				• •	1 b (6)	ļ	X
. 63	haring of facilities, equipm	ient, mailing its	sts, other assets,	, or paid emplo	yees		•	1 c	L	X
d if	the answer to any of the ane goods, other assets, or send transaction or sharing a	above is 'Yes,' rvices given by	complete the fol the reporting foun how in column (llowing schedul idation If the for d) the value of	e Colum indation re the goods	n (b) should alw eceived less than s. other assets.	vays show the fair fair market value ii or services receive	market val	ue of	
(a) Line			of noncharitable exem				sfers, transactions, and		ngemen	s
N/A	(-)	(-),			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	,	,		3	-
19/21					-				·	
		 			+			<u>-</u>		
		+								
		†			+		·			
		<u> </u>			+					
		1								
		 								
		 			+			······································		
+		 			- 					
		 							.	
		+								
		 		 	 					
		-			 					
							7			
		ļ	·				· - · · · · · · · · · · · · · · · · · · ·			
		<u> </u>						· · · · · · · · · · · · · · · · · · ·		
d	the foundation directly or in escribed in section 501(c) "Yes," complete the follow	of the Code (o	d with, or related ther than section	to, one or more n 501(c)(3)) or i	tax-exemp in section	ot organizations 527?		Yes	X	No
	(a) Name of organizat	ion	(b) Type	of organizatio	n	(c) Description of re	ationship		
N/A							·			
							· · · · · · · · · · · · · · · · · · ·			
	Under penalties of perury, I decla	re that I have exam	ined this return, includ	ding accompanying	schedules ar	nd statements, and to	the best of my knowled	ge and belief,	it is true	· ·
Sign Here	correct, and complete. Declaration	of preparer (other	than taxpayer) is base	ed on all information $5/i$	711	_	ledge.	May the this retur preparer	n with th	ne I
	Signature of officer or trustee	-		Date		reasurer	· · · · · · · · · · · · · · · · · · ·	_ See mstr	uctions,	-, I
	Print/Type preparer's na	ama .	Preparer's s			Date		X	Yes	No
				Signature	-L-		Checkif			
Paid	Jennifer Zac			mu - Sal	cray	5/14/18	self-employed	P01390	728	
Prepa	rer Firm's name 🔭 🚹	MOSELEY &	RIDDLÉ	Γ			Firm's EIN ► 75-2	759416		
Use C	-	521 West 7	th Street	0						
	~	Plainview,	******	6219		J	Phone no (806) 293-	<u> 368</u> 1	
RAA								Form 99		2017)

in . 7	Federal Statements	Page ²
Cuent 20488960	GARRISON FAMILY FOUNDATION	20-488601
5/14/18		07:36P
Statement 1 Form 990-PF, Part I, Line 11 Other Income		
	(a) (b) Net Revenue Investment <u>per Books</u> Income	(c) Adjusted Net Income
Other Investment Income	Total $\frac{\$}{\$}$ 8,032. $\frac{\$}{\$}$ 8,032. $\frac{\$}{\$}$ 8,032.	\$ 8,032. \$ 8,032.
Statement 2 Form 990-PF, Part I, Line 16b Accounting Fees		
PROFESSIONAL FEES	(a) (b) Net (c) Expenses Investment Adjusted Net Income \$\frac{1,600}{5}\$ \frac{\$\frac{1}{1},600}{5}\$ \frac{\$\frac{1}{1},600}{5}\$ \frac{\$\frac{1}{1},600}{5}\$ \frac{\$\frac{1}{1},600}{5}\$ \frac{\$\frac{1}{1},600}{5}\$ \frac{\$\frac{1}{1},600}{5}\$ \frac{\$\frac{1}{1},600}{5}\$ \frac{1}{1},600}	ne <u>Purposes</u> 00.
Statement 3 Form 990-PF, Part I, Line 16c Other Professional Fees		
INVESTMENT MANAGEMENT FEES	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income	me <u>Purposes</u>
INVESIMENT MANAGEMENT FEES	Total \$\frac{\\$77,851.}{\\$77,851.} \\$\frac{\\$77,851.}{\\$77,851.} \\$\frac{\\$77,851.}{\\$77,851.} \\$\frac{\\$77,851.}{\\$77,851.}	
Statement 4 Form 990-PF, Part I, Line 18 Taxes		
	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Incom	ne <u>Purposes</u>
FOREIGN TAXES ON INVESTMENTS	\$ 6,332. \$ 6,332. \$ 6,332. Total \$ 6,332. \$ 6,332. \$ 6,332.	32. 32. \$ 0.

7. با	Federal S	Statements		Page 2
= - ธแะ: 20488960	GARRISON FAM	ILY FOUNDATION		20-488601
5/14/ .8				07·36P
Statement 5 Form 990-PF, Part I, Line 23 Other Expenses				
		(a) (b) Net enses Investmen Books Income	Adjusted Net Income	<u>Purposes</u>
BANK CHARGES	Total <u>\$</u>	45. \$ 45 45. \$ 45	5. \$ 45 5. \$ 45	<u>\$</u> <u>\$</u> 0
Form 990-PF, Part II, Line 10a Investments - U.S. and State G State/Municipal Obligation	•	Valuation Method	Book Value	Fair Market Value
	•	Valuation		
MARKETABLE BONDS - ZIEGL MARKETABLE BONDS-SMITH	ER	Mkt Val Mkt Val	181,890. 21,774.	\$ 181,890. 21,774.
		Total	203,664.	
Statement 7 Form 990-PF, Part II, Line 10b				···-
Investments - Corporate Stock	S	Valuation	Book	Fair Market
Corporate Stocks MARKETABLE STOCKS - FIDE		<u>Method</u> Mkt Val	Value 2,411,930.	<u>Value</u>
MARKETABLE STOCKS - FIRST	T FIN AGENCY	Mkt Val	4,072,089.	5,475,689
MARKETABLE STOCKS - TDAM MARKETABLE STOCKS - ZIEG	LER	Mkt Val Mkt Val	1,067,149. 317,346.	3,320,139 345,457
MARKETABLE STOCKS - FIRS	T FIN AGENCI	Mkt Val Total	3,693,313. 3 11,561,827.	5,299,481 \$ 18,558,136
Statement 8 Form 990-PF, Part II, Line 10c Investments - Corporate Bond	S		-	
Corporate Bonds		Valuation <u>Method</u>	Book Value	Fair Market Value

Mkt Val \$ Total \$

MARKETABLE BONDS - ZIEGLER

955,293. \$ 955,293. \$

955,293. 955,293.

Statement 9 Form 990-PF, Part II, Line 13 Investments - Other	Y FOUNDATION				20-488601
Statement 9 Form 990-PF, Part II, Line 13					20 -100001
Form 990-PF, Part II, Line 13					07:36P
Other Investments	Valuation <u>Method</u>		Book Value		r Market Value
MARKETABLE NOTES-SMITH FINANCIAL ZEIGLER EQUITY FUNDING	— Mkt Val Mkt Val	\$ 1,	,444,030. 43,013.	\$ 1	,471,029. 39,707.
	Total	\$ 1	,487,043.	\$ 1	,510,736.
Statement 11 Form 990-PF, Part III, Line 5			Total	\$	1,248.
Other Decreases FEDERAL INCOME TAX			Total	\$ \$	6,000 6,000
Statement 12 Form 990-PF, Part IV, Line 1 Capital Gains and Losses for Tax on Investment Incom	1e				
Item (a) Description	(b) 1 <u>Acqui</u>		(c) Dat		(d) Date Sold_
1 FIDELITY 2 FIDELITY 3 MID ATLANTIC CAPITAL GROUP 4 NATIONAL FINANCIAL SERVICE 5 AMERENENERGY GENERATING 6 TOYS R US NOTE CALL	Purch Purch Purch Purch Purch Purch	ased ased ased ased	Vari Vari Vari 10/20/2 5/07/2 2/21/2	ous ous 2015 2013	Vario Vario Vario 6/07/20 2/02/20 2/02/20

(h)

Gain

(Loss)

850,872. -126,881.

-22,468.

ZIEGLER

ZIEGLER

(e)

Gross

Sales

257,106. 723,991.

FIRST FINANCIAL TRUST FIRST FINANCIAL TRUST FIRST FINANCIAL TRUST FIRST FINANCIAL TRUST FIRST FINANCIAL TRUST

(f)

Deprec.

Allowed

(g)

Cost

<u>Basis</u>

279,574.

8

9

10

11

12

13

14

<u> Item</u>

1

2

Purchased

Purchased

Purchased

Purchased

Purchased

Purchased

Purchased

12/31/69 12/31/69

(j) Adj. Bas.

(i)

FMV

Various

Various

Various

Various

Various

Various

Various

(k)

Excess

Various

Various

Various

Various

Various

Various 9/27/2017

(1)

Gain

(Loss)

-22,468. -126,881.

-
•
,

Federal Statements

Page 4

Eng.: 20488960

GARRISON FAMILY FOUNDATION

20-4886012

5/14/13

07:36PM

Statement 12 (continued)
Form 990-PF, Part IV, Line 1
Capital Gains and Losses for Tax on Investment Income

Item 3 4 5 6 7 8 9 10 11 12 13	(e) Gross Sales 153,496. 86,850. 12,235. 28,193. 30,800. 33,713. 70,000. 335,212. 1548832. 75,365. 204,392. 1391119.	(f) Deprec. Allowed	(g) Cost <u>Basis</u> 329,704. 71,669. 12,235. 25,954. 31,415. 54,091. 56,899. 283,356. 1101446. 21,435. 184,212. 1238212.	(h) Gain (Loss) -176,208. 15,181. 0. 2,23961520,378. 13,101. 51,856. 447,386. 53,930. 20,180. 152,907.	(i) FMV 12/31/69	(j) Adj. Bas. <u>12/31/69</u>	(k) Excess (i)-(j)	(1) Gain (Loss) \$-176,208. 15,181. 0. 2,23961520,378. 13,101. 51,856. 447,386. 53,930. 20,180. 152,907.
							Total	\$ 410,230.

Statement 13 Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours <u>Per Week Devoted</u>	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
PAM CARROTHERS 2810 AURORA HORSESHOE BAY, TX 78657	Vice President 0	\$ 0.	\$ 0.	\$ 0.
BILL CARROTHERS 2810 AURORA HORSESHOE BAY, TX 78657	Treasurer 0	0.	0.	0.
SHARON WALKER 4829 EAGLE FEATHER AUSTIN, TX 78735	Secretary 0	0.	0.	0.
BRUCE WALKER 4829 EAGLE FEATHER AUSTIN, TX 78735	Vice President 0	0.	0.	0.
HARVEY GARRISON 9806 TOLEDO LUBBOCK, TX 79424	President 0	0.	0.	0.
	Total	\$0.	\$ 0.	\$ 0.

•		
.40		7
ش. شامه،		
	•	-

Federal Statements

Page 5

Cne .: 20488960

GARRISON FAMILY FOUNDATION

20-4886012

5/14/13

07:36PM

Statement 14 Form 990-PF, Part XV, Line 2a-d **Application Submission Information**

Name of Grant Program:

Name:

SHARON WALKER

Care Of:

Street Address:

4829 EAGLE FEATHER AUSTIN, TX 78375 (512) 899-0828

City, State, Zip Code: Telephone:

E-Mail Address:

WALKERSHAR@YAHOO.COM

Form and Content:

WRITTEN APPLICATION, PROOF OF 501(C) TAX EXEMPT STATUS, DETAILED EXPLANATION OF REQUEST

Submission Deadlines:

100116

Restrictions on Awards:

BOARD APPROVAL

Statement 15 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose ofGrant	Amount
RUNNING WATER DRAW NURSING HOME PO BOX 409 OLTON TX 79064	NONE		CONTRIBUTE TO RETIREMENT OF LONG TERM DEBT AT CENTER	\$ 110,000.
CETA CANYON CAMP & RETREAT CENTER 37201 FM 1721 HAPPY TX 79042	NONE		CONSTRUCTION OF NATURE CENTER	100,000.
TEXAS TECH UNIVERSITY 2500 BROADWAY LUBBOCK TX 79401	NONE		ONGOING EDUCATION AND SCHOLARSHIP GRANTS FOR STUDENTS	90,000.
TEXAS TECH UNIVERITY HEALTH SCIENCES 3601 4TH ST. LUBBOCK TX 79401	NONE		ALZHEIMER RESEARCH	120,000.
RONALD MCDONALD HOUSE 3413 10TH ST LUBBOCK TX 79415	NONE		PROGRAM SUPPORT FOR LUBBOCK RM HOUSE	10,000.
HIGH POINT VILLAGE 6223 COUNTY ROAD 6300 LUBBOCK TX 79416	NONE		PROGRAM SUPPORT FOR ONGOING PROGRAMS	10,000.

25.7·	Federal State	ements		Page 6
Che : 20488960	GARRISON FAMILY	OUNDATIO	N	20-4886012
5/14/18 Statement 15 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				07.36PM
Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
AUSTIN PETS ALIVE PO BOX 6247 AUSTIN TX 78762	NONE		IMPROVEMENTS TO PET CENTER AND OPERATING EXPENSES	\$ 60,000.
JEREMIAH PROGRAM P.O. BOX 50590 AUSTIN TX 78763	NONE		CHILD CARE AND EDUCATION PROGRAMS FOR CHILDREN OF JEREMIAH PROGRAMS	122,500.
MALTA FARMS 13908 FM 400 SLATON TX 79364	NONE		OPERATING EXPENSES	3,200.
SNACK PAK 4 KIDS 701 PARK PLACE AMARILLO TX 79101	NONE		SCHOOL LUNCH PROGRAM	5,000.
HARMONY SCHOOL OF CREATIVE ARTS 1503 MORMON MILL ROAD P.O. BOX 1065 MARBLE FALLS TX 78657	NONE		OPERATING EXPENSES	25,000.
FOUR LEGGED FRIENDS 16207 NORTH FM 179 SHALLOWATER TX 79362	NONE		FACILITY CONSTRUCTION AND PROGRAM SUPPORT	75,000.
DRESS FOR SUCCESS 701 TILLERY ST AUSTIN TX 78702	NONE		FINANCIAL EDUCATION PROGRAM FOR THE NEEDY	8,000.
MAKE-A-WISH CENTRAL & SOUT TEXAS 2224 WALSH TARILTON LANE AUSTIN TX 78735	H NONE		10 MAKE A WISHES FOR CHILDREN	55,000.
COVENANT HEALTHCARE PLAINVIEW PO BOX 488 PLAINVIEW TX 79073	NONE		CAPITAL CAMPAIGN FOR RECONSTRUCTION ON HOSPITAL	100,000.
FIRST TEE OF AUSTIN 5501 ED BLUESTEIN BLVD AUSTIN TX 78723	NONE		GOLF COURSE EQUIPMENT	58,000.

|

ļ

i

Federal Statements					Page :	
E.: 20488960	GARRISON FAMILY FOUNDATION				0-488601	
14/18					07:36PI	
Statement 15 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year						
Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	<u>An</u>	ount_	
SOUTH PLAINS WILDLIFE REHABILITATION CTR 3308 95TH STREET LUBBOCK TX 79423	NONE		CONSTRUCTION OF ADDITION AND OPERATING FUNDS AT REHAB CENTER	\$	36,000	
AUSTIN SUNSHINE CAMPS PO BOX 684980 AUSTIN TX 78768	NONE		SUMMER PROGRAMS FOR CAMP RETREAT		25,000	
			Total	\$ 1,0	012,700	