

**Return of Private Foundation** 

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

OMB No 1545-0052 2017

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

Fo	r <u>calen</u>	dar year 2017 or tax year beginning	, and ending						
Na	me of four	ndation				A Employer	identification number		
LE	<u>E_J &amp; B</u>	ILLIE B WOODS MEMORIAL SCHOLARSHIP FUND							
Nu	mber and	street (or PO box number if mail is not delivered to street address)		Room	/surte		20-7369859		
	D BOX			L		B Telephone	number (see instruction	ns)	
City	y or town,	state or province, country, and ZIP or foreign postal code							
<u></u>	LORA	DO CITY TX		2-103	31		(325) 728-522	1	
Foi	eign cour	ntry name Foreign province/state/county	Foreig	ın posta	l code	C If exempt	ion application is pendin	g, check here 🕨 🔲	
G	Check		of a former pu	ıblıc cl	harity	D 1. Foreigi	n organizations, check h	ere ▶ 📘	
		☐ Final return ☐ Amended ret	urn			2. Foreigi	n organizations meeting	the 85% test,	
					4	check	here and attach comput	ation ► 📘	
<u>H</u>	Check	type of organization X Section 501(c)(3) exempt pri	vate foundation	on 🏽			foundation status was te	rminated under	
	Section	n 4947(a)(1) nonexempt charitable trust	able private fo	<u>undåt</u>	rőn Ч	Section 50	07(b)(1)(A), check here		
1	Fair ma	arket value of all assets at   J Accounting method	X Cash	□ Ad	ccrual	F If the four	idation is in a 60-month		
	end of	year (from Part II, col (c), Other (specify)					tion 507(b)(1)(B), check		
	line 16	93,519 (Part I, column (d) must be	on cash basis	;)				_ <u></u>	
P	art l	Analysis of Revenue and Expenses (The total of	(a) Revenue	and				(d) Disbursements	
		amounts in columns (b), (c), and (d) may not necessarily	expenses pe			investment come	(c) Adjusted net income	for charitable purposes	
		equal the amounts in column (a) (see instructions))	books	}				(cash basis only)	
1/5	1	Contributions, gifts, grants, etc., received (attach schedule)			`r <sub>r</sub> '			x 22 x 2 1	
XX	2	Check ▶☐ if the foundation is <b>not</b> required to attach Sch. B			, : ' ,	, ,	\$ car , & ^ st	1, 2, 27 2 5	
Ų,	3	Interest on savings and temporary cash investments							
(K)	4	Dividends and interest from securities	3	3,596		3,596		A 11. 1	
	5a	Gross rents						设备产品的Ting 1	
	b	Net rental income or (loss)				Tage of Care	" - Day of Markey "	場所の大き	
景雪	6a	Net gain or (loss) from sale of assets not on line 10		186	1, 48		· But the defeating	海拔的从2006年。	
j 5	b	Gross sales price for all assets on line 6a 8,635		7,**	~~ <u>~</u> ~	`, 'ya", a	養を行って	May Collaboration	
こう Revenue	7	Capital gain net income (from Part IV, line 2)	* 14157 A	٠, ١	1.		W. A. T. E HARRY.	St. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
· œ	8	Net short-term capital gain		, Tu	** 1 + P. P.			क्षाक्षेत्रमा है।	
	9	Income modifications		* *		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<del></del>	The state of the s	
	10a	Gross sales less returns and allowances		44.7		a 4, p 44 c	e to the second		
	b	Less Cost of goods sold			• #	Sec. 2 . 1 8	The state of the s	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	C	Gross profit or (loss) (attach schedule)	} <del></del> -	∤			<del></del>		
	11	Other income (attach schedule)	<del></del> -	700		0.500	<del> </del>		
	12	Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc	3	3,782 882		3,596 882	0	24. 3. , \$." )	
enses	13			002		002			
ž	14 15	Other employee salaries and wages Pension plans, employee benefits							
_	16a	Legal fees (attach schedule)						<del></del>	
ŵ	b	Accounting fees (attach schedule)		150		150			
<u>&lt;</u>	c	Other professional fees (attach schedule)		-100		100			
äti	17	Interest					<del></del>		
Sti	18	Taxes (attach schedule) (see instructions; CEIVEE		218			<del></del>		
Ξ	19	LIENTECISTION (STISCH CCHECULE) SHOUGHIELD	1 16/01					, , , , ,	
ᄩ	20		121						
ĕ	21	Occupancy Travel, conferences, and meetings  MAY 2 1 2018	I I						
ם	22		7						
Operating and Administrative Exp	23	Printing and publications Other expenses (attach schedule) OGDEN, U							
<u>ju</u>	24	Total operating and administrative expenses.				•		_ <del> </del>	
폌	l	Add lines 13 through 23	1	,250		1,032	0	0	
bel	25	Contributions, gifts, grants paid	2	2,020		,	· · · · · · · · · · · · · · · · · · ·	2,020	
ō	26	Total expenses and disbursements. Add lines 24 and 25	3	3,270		1,032	0	2,020	
	27	Subtract line 26 from line 12		Ĩ.,	1 45		物门设置的	7. 3. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.	
	а	Excess of revenue over expenses and disbursements .		512				<b>学课的</b>	
	b	Net investment income (if negative, enter -0-)	, ,	; •- */		2,564	1.4. 深刻形成	100年 李林 李 100	
	С	Adjusted net income (if negative, enter -0-)	· " " " " " " " " " " " " " " " " " " "	25	ŧ	-4, "- ·	0	學。這個學學學	

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D-	Attached schedules and amounts in the description column should be for end of year amounts only (See instructions.)		Beginning of year	Ena o	of year	
		should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash—non-interest-bearing				
	2	Savings and temporary cash investments				
	3	Accounts receivable				
		Less allowance for doubtful accounts				
	4	Pledges receivable		14.2 7.7	15	
		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)		, , ,	بند	
		Less allowance for doubtful accounts				
ts	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges .				
A	10a	Investments—U S and state government obligations (attach schedule)	75,517	76,029	76,480	
	b	Investments—corporate stock (attach schedule)	13,005	13,005	17,039	
	С	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis	) " \s		4	
		Less accumulated depreciation (attach schedule)				
	12	Investments—mortgage loans			_ <del></del>	
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment basis		196	Res .	
		Less accumulated depreciation (attach schedule)				
	15	Other assets (describe )			-	
	16	Total assets (to be completed by all filers—see the				
		instructions Also, see page 1, item I)	88,522	89,034	93,519	
	17	Accounts payable and accrued expenses		<del></del>	رو يون يوند وي	
w	18	Grants payable				
Liabilities	19	Deferred revenue				
Ē	20	Loans from officers, directors, trustees, and other disqualified persons				
ä	21	Mortgages and other notes payable (attach schedule)				
_	22	Other liabilities (describe ►)				
	23	Total liabilities (add lines 17 through 22)	0	0		
		Foundations that follow SFAS 117, check here				
alances		and complete lines 24 through 26, and lines 30 and 31.				
Ĕ	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted	!			
Net Assets or Fund	ĺ	Foundations that do not follow SFAS 117, check here				
Ē		and complete lines 27 through 31.				
ō	27	Capital stock, trust principal, or current funds				
ets	28	Paid-in or capital surplus, or land, bldg, and equipment fund			<b>"你</b> 我们是一个	
<b>3</b> 8	29	Retained earnings, accumulated income, endowment, or other funds	88,522	89,034		
Ä	30	Total net assets or fund balances (see instructions)	88,522	89,034		
<u>f</u> et	31	Total liabilities and net assets/fund balances (see				
_		instructions)	88,522	89,034		
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances				
_		net assets or fund balances at beginning of year-Part II, column (a),	, line 30 (must agree	with		
		of-year figure reported on prior year's return)	, <b>-</b>	. 1	88,522	
2		r amount from Part I, line 27a		2	512	
3				3		
4		ines 1, 2, and 3		4	89,034	
5		eases not included in line 2 (itemize)		5		
6		net assets or fund balances at end of year (line 4 minus line 5)-Part	II, column (b), line 30	6	89,034	
					- 000 DE	

Part	V Capital Gains and	Losses for Tax on Investm	ent Income					
		nd(s) of property sold (for example, real esta use, or common stock, 200 shs MLC Co)	te,	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
_1a_				<u> </u>		<del> </del>		
<u>b</u>					<del></del>	<del> </del>		
<u>c</u> _				<del>   </del>		<del> </del>		
e		<del></del>				<del></del>		
<del></del>	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		(h) Gain or (loss) ((e) plus (f) minus (g))		
a								
<u>b</u>								
			<del> </del>					
d e				<del></del>				
	Complete only for assets sh	nowing gain in column (h) and owned	by the foundation	on 12/31/69		N. 1. 41. N		
	(i) F M V as of 12/31/69 (j) Adjusted basis (k) Excess of col (i) over col (j), if any			col (k), but i	col (h) gain minus not less than -0-) <b>or</b> (from col (h))			
а			-					
b								
<u> </u>								
<u>d</u>								
<u>e</u> _		/ If goin s	dec enter in Par	rt Line 7				
2	Capital gain net income or	(net canital inee)	also enter in Pai enter -0- in Par	<b>&gt;</b> 1	2	0		
3	Net short-term capital gain	or (loss) as defined in sections 12		1,	-			
		fine 8, column (c) See instruction		er -0- in 1	1			
	Part I, line 8				3	0		
Part	V Qualification Und	der Section 4940(e) for Redu	ced Tax on N	let Investment	Income			
Was t	s," the foundation doesn't qu	section 4942 tax on the distributabualify under section 4940(e) Do no	t complete this	part	<u> </u>	☐ Yes ☒ No		
1		unt in each column for each year,	see the instruct	ions before makin	g any entries	(4)		
Cale	(a) Base period years endar year (or tax year beginning in)			(c) of noncharitable-use as:	sets (col (	(d) Distribution ratio D) divided by col (c))		
	2016		,977		,406	0 043990		
	2015 2014		,652 ,000		,149 ,538	0 051037 0 031733		
	2013		,500		,714	0 031733		
	2012		,500		,801	0 045546		
2	Total of line 1, column (d)				2	0 219321		
3	3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years					0 043864		
4	4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5				4	90,355		
5	5 Multiply line 4 by line 3				5	3,963		
6	6 Enter 1% of net investment income (1% of Part I, line 27b)				6	26		
7	7 Add lines 5 and 6				7	3,989		
8	Enter qualifying distribution If line 8 is equal to or great Part VI instructions	ns from Part XII, line 4 ter than line 7, check the box in Pa	art VI, line 1b, a	nd complete that p	eart using a 1% t			
						Form 990-PF (2017)		

ran.	Excise lax Based on investment income (Section 4940(a), 4940(	(D), 494(	<u>(e), or 4948—see</u>	ınst	ruction	ons)			
1a	Exempt operating foundations described in section 4940(d)(2), check here  Date of ruling or determination letter  (attach copy of letter if ne		er "N/A" on line 1 -see instructions)		ign 11	異之		1	,
b	Domestic foundations that meet the section 4940(e) requirements in Part	_	·	}	1			51	
	here ▶ ☐ and enter 1% of Part I, line 27b							,	- -
С	All other domestic foundations enter 2% of line 27b Exempt foreign organization I, line 12, col (b)	nızatıons	s, enter 4% of	J	·	<del> </del>			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundation	ns only, o	thers, enter -0-)		2	<u> </u>		0	
3	Add lines 1 and 2				3			51	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundation	ns only, o	others, enter -0-)		4				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or it	iess, ent	er -0-		5	<u> </u>		51	
6	Credits/Payments				وتنعوب	હૈ :	5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		ļ
а	2017 estimated tax payments and 2016 overpayment credited to 2017	6a				100 m		* ',	٠. ا
b	Exempt foreign organizations—tax withheld at source	6b			. 144			*	•
C	Tax paid with application for extension of time to file (Form 8868)	6c			4 <u>).</u> 1.		100		ۇغ د
_d	Backup withholding erroneously withheld	6d				-			
7	Total credits and payments Add lines 6a through 6d							0	
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here		2220 is attached	_	8	<del> </del>			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount ow				9	<del> </del>		51	
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the air	mount o	verpaid Refunded		10	<u> </u>		0	—
_	Enter the amount of line 10 to be Credited to 2018 estimated tax		Retuilded					0	
	VII-A Statements Regarding Activities	ototo or	local localistics or	did.	4		,	Yes	No
1a	During the tax year, did the foundation attempt to influence any national, sparticipate or intervene in any political campaign?	state, or	local legislation of	ulu	ι		1a	162	X
b	Did it spend more than \$100 during the year (either directly or indirectly) f	for politic	eal nurnocae? Saa	tha			- ia		
D	instructions for the definition	ioi politic	ai puiposes, See	uie		·	1b		Х
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activ	ure saitiv	d conies of any ma	teria	le			\$ 85°	<del>- ^}-,</del>
	published or distributed by the foundation in connection with the activities		a copies of any ma	CHE	10		90" 1		Ĭ.,
С	Did the foundation file Form 1120-POL for this year?	•					1c	-4: fr	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year						3.00	1.00	
u	(1) On the foundation $\blacktriangleright$ \$ (2) On foundation managers $\blacktriangleright$ \$							3.7	ية ين≢ي
е	Enter the reimbursement (if any) paid by the foundation during the year for			mpc	sed		\ \alpha_{\bullet} \]	The man	-1 <sup>4</sup> j.
_	on foundation managers > \$			•			1 1		j
2	Has the foundation engaged in any activities that have not previously bee	en report	ed to the IRS?				2		Х
	If "Yes," attach a detailed description of the activities	•					₹,		
3	Has the foundation made any changes, not previously reported to the IRS, in its	governin	g instrument, articles	;			, 3,1		
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a confor	rmed cop	y of the changes				3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or mo	ore durir	ng the year?				4a		Х
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	n during	the year?				5		X
	If "Yes," attach the statement required by General Instruction T							ا در شوعا	233
6	Are the requirements of section 508(e) (relating to sections 4941 through	4945) s	atisfied either				1.3	10 m	,,
	<ul> <li>By language in the governing instrument, or</li> </ul>						* (4	1	
	By state legislation that effectively amends the governing instrument so	that no	mandatory directio	ns ti	nat		18.00		
	conflict with the state law remain in the governing instrument?						6	X	
~	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," of	complete f	Part II, col. (c), and Par	t XV			7	X	
7				_					i
<i>1</i> 8а	Enter the states to which the foundation reports or with which it is register			<b>•</b>			1.3	1 P	
8a	Enter the states to which the foundation reports or with which it is register	red See	instructions	<b>•</b>					
_	Enter the states to which the foundation reports or with which it is register.  If the answer is "Yes" to line 7, has the foundation furnished a copy of For	red See rm 990-f	instructions PF to the Attorney (	<b>•</b>	eral		<b>Ob</b>		3 -
8a b	Enter the states to which the foundation reports or with which it is register.  If the answer is "Yes" to line 7, has the foundation furnished a copy of For (or designate) of each state as required by <i>General Instruction G?</i> If "No,"	red See rm 990-f " attach	instructions  PF to the Attorney ( explanation	► Gen			8b	X	3 2
8a	Enter the states to which the foundation reports or with which it is register.  If the answer is "Yes" to line 7, has the foundation furnished a copy of For (or designate) of each state as required by <i>General Instruction G?</i> If "No," is the foundation claiming status as a private operating foundation within	red See rm 990-f " attach the mea	rinstructions  PF to the Attorney ( explanation ning of section 494	<b>⊳</b> Gend	(3)			X	2
8a b	Enter the states to which the foundation reports or with which it is register.  If the answer is "Yes" to line 7, has the foundation furnished a copy of Foi (or designate) of each state as required by <i>General Instruction G?</i> If "No," Is the foundation claiming status as a private operating foundation within or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? So	red See rm 990-f " attach the mea	rinstructions  PF to the Attorney ( explanation ning of section 494	<b>⊳</b> Gend	(3)		8b	X	2
8a b	Enter the states to which the foundation reports or with which it is register.  If the answer is "Yes" to line 7, has the foundation furnished a copy of For (or designate) of each state as required by <i>General Instruction G?</i> If "No," is the foundation claiming status as a private operating foundation within or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? So "Yes," complete Part XIV	red See rm 990-f " attach the mea ee the ir	Instructions PF to the Attorney ( explanation ning of section 494 estructions for Part	Gend 12(j)(	(3) If		8b	X	ž X
8a b	Enter the states to which the foundation reports or with which it is register.  If the answer is "Yes" to line 7, has the foundation furnished a copy of Foi (or designate) of each state as required by <i>General Instruction G?</i> If "No," Is the foundation claiming status as a private operating foundation within or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? So	red See rm 990-f " attach the mea ee the ir	Instructions PF to the Attorney ( explanation ning of section 494 estructions for Part	Gend 12(j)(	(3) If		8b	X	x X

$\overline{}$	Statements Regarding Activities (Continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	the meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11	_	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement. See instructions	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ▶ DWAYNE HARRIS TRUST OFFICER Telephone no ▶ (325) 72	8-522	1	
	Located at ▶ P O BOX 1031 COLORADO CITY TX ZIP+4 ▶ 79512-10			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here			<b>▶</b> □
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the		^ _f, 4	
	name of the foreign country	* 3h.	ا برقي	
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.	2.71	Yes	No
1a	During the year, did the foundation (either directly or indirectly)	1. 1X	المرائد	
10			, S.	1,
		35	13	* *3
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  [] Yes [X] No		1.17	3 7
		1	**	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1 4 35 7	XX.	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1	13. 14. 14. 14. 14. 14. 14. 14. 14. 14. 14	35.
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	1	J. 4	4.75
	the benefit or use of a disqualified person)?	1 × 3 × 6 ×	77 124	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		167	
	foundation agreed to make a grant to or to employ the official for a period after			4
	termination of government service, if terminating within 90 days )	70		280.00
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			Box
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	N/A	
	Organizations relying on a current notice regarding disaster assistance, check here	p 20	- 64	£.,
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	12 W	€ <del>1</del> 822 ′	$\mathcal{I}_{\mathcal{I}_{\mathcal{I}_{\mathcal{I}_{\mathcal{I}}}}}$
	were not corrected before the first day of the tax year beginning in 2017?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	2 3.	17.2	:
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	7. E. Free	jir L	,
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and	1		, , , , , , , , , , , , , , , , , , ,
	6e, Part XIII) for tax year(s) beginning before 2017?		ME.	1
	If "Yes," list the years  20 , 20 , 20 , 20	多。	W.	
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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			l
	all years listed, answer "No" and attach statement—see instructions )	2b	N/A	
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here	4.50	24	333
•	► 20, 20, 20, 20	1,362		• •
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	1		
	at any time during the year?	1	137	
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or			
U	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the		11 1	4
	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	小型		, , l
	foundation had excess business holdings in 2017)	3b	N/A	
40		4a	<u>'"'</u> ^	X
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?  Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	44	<del> </del>	
þ	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	-ئىــــــــــــــــــــــــــــــــــــ	X
	chantable purpose that had not been removed norm jeopardy before the met day of the tax year beginning in 2017.	75	<u></u>	

Part	VII-B	Statements Regarding Activities	tor Wi	nich Form 4	1720 N	nay Be Re	quire	d (contin	ued)			
5a		vear, did the foundation pay or incur any n propaganda, or otherwise attempt to in			section	4945(e))?		Yes	X No		يد يا را وه چهاويا	1
		e the outcome of any specific public ele or indirectly, any voter registration drive'		ee section 49	955), or	to carry on	•	Yes	X No	* 1.4 * 2.4	1 % 1 % 1 % 1 % 1 % 1 % 1 % 1 % 1 % 1 %	
	(3) Provide	a grant to an individual for travel, study,	or othe	er sımılar purj	oses?			Yes	X No	Sec.	1, 40 g	
	(4) Provide section	a grant to an organization other than a 4945(d)(4)(A)? See instructions	charitat	ole, etc , orga	nızatıoı	n described	in	Yes	X No		100 mg	41.1
		for any purpose other than religious, ches, or for the prevention of cruelty to child			erary, c	or education	ıal	Yes	X No		in a	
b	-	er is "Yes" to 5a(1)–(5), did any of the tr s section 53 4945 or in a current notice r		•	-		•		d in	5b	N/A	<u>, '</u>
С	because it maintained expenditure responsibility for the grant?						☐ Yes	► □ □ No				
6a	If "Yes," attach the statement required by Regulations section 53 4945–5(d)  Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?						ns	☐ Yes	⊠ No	Section 1		
b	b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  [6b]  If "Yes" to 6b, file Form 8870								70 de	X		
7a b	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction.						Yes action?	X No	7b	N/A		
Part		formation About Officers, Directors directors	ors, Tr	ustees, Fo	undati	on Manag	gers, F	lighly P	aid Em	ploye	es,	
1_	List all offi	cers, directors, trustees, and foundat	ion ma	nagers and t	heir co	mpensatio	n. See	instructi	ons.			
		(a) Name and address	hour	e, and average rs per week ed to position	(If r	mpensation not paid, nter -0-)	emplo	Contribution byee benefit erred compe	plans	(e) Expe	nse acc	
	NATIONAL E		TRUST	ree I								
<u> P O B</u>	OX 1031 CC	DLORADO CITY, TX 79512-1031		<u>0</u> 5		882						
					'							
								·				
2	Compensa "NONE."	tion of five highest-paid employees (	other th	nan those in	cluded	on line 1—	see ins			ne, ent	er 	
	(a) Name and	address of each employee paid more than \$50,000		(b) Title, and a hours per w devoted to po	eek	(c) Compen	sation	(d) Contrib employee plans and compen	benefit deferred	(e) Expe	ense acc allowan	
NONE								-				
Total	number of ot	her employees paid over \$50,000							<b>•</b>			

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employ 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).  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 hereficianies served, conferences convened, research papers produced, etc.  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  1  All other program-related investments see instructions  3	7369859 Page <b>7</b>	
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).  NONE	≟mployees,	
(a) Name and address of each person paid more than \$50,000 (b) Type of service (c)  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 and other beneficianes served, conferences convened, research papers produced, etc.  1  2  3  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  1  All other program-related investments. See instructions	NF "	
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 beneficianes served, conferences convened, research papers produced, etc  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 1 All other program-related investments. See instructions	(c) Compensation	
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 beneficianes served, conferences convened, research papers produced, etc  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  1 All other program-related investments See instructions		
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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  All other program-related investments See instructions		
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  1  All other program-related investments See instructions	Expenses	
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  1  All other program-related investments See instructions	<del></del>	
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  1  All other program-related investments See instructions		
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  1  All other program-related investments. See instructions		
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  1  All other program-related investments See instructions	-	
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  1  All other program-related investments See instructions	-	
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Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  2  All other 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  2  All other program-related investments. See instructions	-	
2  All other program-related investments See instructions		IX-B Summary of Program-Related Investments (see instructions)
All other program-related investments See instructions	Amount	be the two largest program-related investments made by the foundation during the tax year on lines 1 and 2
All other program-related investments. See instructions	·- }	
All other program-related investments. See instructions	-	
		ner program-related investments. See instructions
		Fingle in the second control of the seco
	-   	
Total. Add lines 1 through 3	Form <b>990-PF</b> (2017	Add lines i tillodgil 5

Part	X Minimum Investment Return (All domestic foundations must complete this part. Foreign	gn foundatio	ns,
	see instructions )		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities .	1a	91,371
b	Average of monthly cash balances	1b	360
C	Fair market value of all other assets (see instructions)	1c	<del></del>
d	Total (add lines 1a, b, and c)	1d	91,731
е	Reduction claimed for blockage or other factors reported on lines 1a and	,	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d .	3	91,731
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see		
	instructions)	4	1,376
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	90,355
6	Minimum investment return. Enter 5% of line 5	6	4,518
<u>Part</u>		ons	
	and certain foreign organizations, check here   and do not complete this part )	· , ,	<u></u>
1	Minimum investment return from Part X, line 6	1	4,518
2a		51	
b	Income tax for 2017 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	51
3	Distributable amount before adjustments Subtract line 2c from line 1	3	4,467
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	4,467
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	4,467
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	2,020
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		
а	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	2,020
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	2,020
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating who	ether the four	
	qualifies for the section 4940(e) reduction of tay in those years		

Form 99	DO-PF (2017) LEE J & BILLIE B WOODS MEMOR	IAL SCHOLARSHIP	FUND	20-7	'369859 Page <b>9</b>
Part	XIII Undistributed Income (see instructions	5)			
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years pnor to 2016	(c) 2016	(d) 2017
	line 7		San Market St. Fr.	· · · · · · · · · · · · · · · · · · ·	4,467
2	Undistributed income, if any, as of the end of 2017				, , , , ,
а	Enter amount for 2016 only	The second second	34	556	1 2 3 3 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
b	Total for prior years 20, 20			T the V	746 A
3	Excess distributions carryover, if any, to 2017	10000000000000000000000000000000000000	The state of the s		
a	From 2012		The state of the s	The state of	State of the state
b	From 2013	*			100
C	From 2014 From 2015			1	
d	From 2016		**************************************	The state of the s	1984 A 1984
e f	Total of lines 3a through e	n		and the latest of the latest o	Market States
4	Qualifying distributions for 2017 from Part XII,	2.2 3 2	and the second of	The state of the s	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
•	line 4 ▶ \$ 2,020				
а	Applied to 2016, but not more than line 2a	المرابع		556	
	Applied to undistributed income of prior years	大部 清 實際		Maria Maria	は、この数はは、
	(Election required—see instructions)				2000年1月1
С	Treated as distributions out of corpus (Election			Company of the Compan	300 Ben 1991
	required—see instructions)		33.357		TO SHEET SHEET SHEET
d	Applied to 2017 distributable amount	, * · · · · · · · · · · · · · · · · · ·	等。	· 一直·明章·	1,464
е	Remaining amount distributed out of corpus		一名, 商1 流。7.	Mary State of the	S 3 4 4 1
5	Excess distributions carryover applied to 2017		, ,	***	m - 2 - 20
	(If an amount appears in column (d), the same		200		
	amount must be shown in column (a))		a series		
6	Enter the net total of each column as		CONT.		
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0	Carry Mary T. Co. J. Mary	Control of the Contro	MANUAL PROPERTY OF THE PARTY OF
b	Prior years' undistributed income Subtract				
	line 4b from line 2b	200 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		A CONTRACT DESCRIPTION	A STANSON AND A STAN A
С	Enter the amount of prior years' undistributed	14年9月前89月1	"		The state of the s
	income for which a notice of deficiency has been issued, or on which the section 4942(a)				
	tax has been previously assessed	The state of the s			
А	Subtract line 6c from line 6b Taxable	1. 1. 1. 1.		1000	Lh trace
ŭ	amount—see instructions				
е	Undistributed income for 2016 Subtract line	View view view view view view view view v	x 1-11 1 1 At		The sales of the s
	4a from line 2a Taxable amount—see		Parties of the state of the sta		建聚式 14.1
	instructions	The same	The state of the s	0	
f	Undistributed income for 2017 Subtract lines	1. A. 17 3.5		The second second	Į
	4d and 5 from line 1. This amount must be				
	distributed in 2018	186	· 沙森克 (東)	The state of the s	3,003
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section			2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<b>克马克斯</b>
	170(b)(1)(F) or 4942(g)(3) (Election may be		V . P. F. W. C. V.		
	required—see instructions)		***	To dear the control of the said	A. Williams Fig. 14.
8	Excess distributions carryover from 2012 not				
_	applied on line 5 or line 7 (see instructions)			TO WAR I STORY	Residence of the control of the cont
9	Excess distributions carryover to 2018.				
40	Subtract lines 7 and 8 from line 6a	* * * * * * * * * * * * * * * * * * *		L. C. San Cal Cal	THE STANDARD OF THE STANDARD O
10	Analysis of line 9	[ 黄龙 流黄 ]			
a h	Excess from 2013 Excess from 2014				
b b	Excess from 2015				
d	Excess from 2016	14.7万种的思想。			
u e	Excess from 2017	1 🐧	电影源 经		<b>"的人,我们</b>
		<u> </u>			Form <b>990-PF</b> (2017)

Part :	XIV Private Operating Foundat	ions (see instru	ictions and Part	VII-A, question 9)		<u>N/A</u>
Ìа	If the foundation has received a ruling of		•	ate operating		
	foundation, and the ruling is effective fo	•	_	▶ {		
b	Check box to indicate whether the foundation	on is a private opera	ting foundation desc	cribed 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		(e) Total
	investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
	each year listed					0
b	85% of line 2a					0
С	Qualifying distributions from Part XII,					
	line 4 for each year listed					0
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities				/	0
е	Qualifying distributions made directly					
	for active conduct of exempt activities Subtract line 2d from line 2c	<u> </u>				0
3	Complete 3a, b, or c for the					
•	alternative test relied upon					
а	"Assets" alternative test—enter					
_	(1) Value of all assets					0
	(2) Value of assets qualifying under			/		
	section 4942(j)(3)(B)(i)			A		0
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in					0
_	Part X, line 6 for each year listed					
С	"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)					1 0
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(III)		İ			0
	(3) Largest amount of support from					
	an exempt organization					0
	(4) Gross investment income					0
Part		n (Complete th	is part only if t	he foundation ha	d \$5 000 or mo	I
rail	any time during the year—			iic iouilaation na	α ψο,σσο σι me	io iii doooto di
1	Information Regarding Foundation M		110.1			
' a	List any managers of the foundation wh	no have contribute	ed more than 2% of	f the total contributio	ns received by the	foundation
u	before the close of any tax year (but on	ly if they have cor	ntributed more than	n \$5.000) (See secti	on 507(d)(2))	
	20.0.0 1.12 0.000 0. 0.1, 1.1.1, 1.1.1	<b>,</b>		, , , ,	( / ( / /	
	List any managers of the foundation wh	20 0WD 10% or mo	ore of the stock of	a corporation (or an i	equally large portion	on of the
J	ownership of a partnership or other ent	ity) of which the fo	oundation has a 10	% or greater interes	t	
	ownership of a paranership of ourse on	,,				
2	Information Regarding Contribution,	Grant, Gift, Loar	n. Scholarship, etc	c Programs:		
_	Check here ▶ ☐ If the foundation or				ations and does n	ot accept
	unsolicited requests for funds. If the fou	undation makes gi	fts, grants, etc , to	individuals or organi	zations under other	er
	conditions, complete items 2a, b, c, and			_		
a	The name, address, and telephone nur			to whom application	s should be addre	ssed
u	The hame, address, and telephone has		. coo o. ano porcon			
D/WA	YNE HARRIS P O BOX 1031 COLORAD	O CITY TX 7951:	2-1031 (325) 728-	5221		
	The form in which applications should be				nclude	
-	The form in the depression of the same of			,		
STAN	IDARD APPLICATION FOR SCHOLARS	HIPS			·	
	Any submission deadlines		<del></del>			
	RE HIGH SCHOOL GRADUATION DAT					
d	Any restrictions or limitations on award	s, such as by geo	graphical areas, ch	naritable fields, kinds	of institutions, or	other
	factors					
HIGH	SCHOOL GRADUATE SELECTED BY	SCHOOL ADMINI	STRATION ET AL			

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	Foundation status of	Purpose of grant or	Amount			
Name and address (home or business)	or substantial contributor	recipient	Contribution				
Name and address (home or business)  a Paid during the year SIERRA SALAZAR 810 E 17TH STREET COLORADO CITY, TX 79512	any foundation manager or substantial contributor  NONE		SCHOLARSHIP	2,020			
Total		<u> </u>	▶ 3	a 2,020			
b Approved for future payment							
Total			▶ 3	<b>b</b> 0			

Pa	rt X\	/I-A Analysis of Income-Producing A	ctivities				rage 12
		ss amounts unless otherwise indicated		usiness income	Excluded by sect	on 512, 513, or 514	
1	Pro	gram service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
•	a						· · · · · · · · · · · · · · · · · · ·
					<del>                                     </del>	<del> </del>	<del></del>
	c			<del>                                     </del>	<del>                                       </del>	·	
	d .				<del> </del>	<u> </u>	
	е.			† - <del></del>	<del> </del>	· · · · · · · · · · · · · · · · · · ·	
	f			· · -			
	g	Fees and contracts from government agencies			-		
2		nbership dues and assessments			<del> </del>		
3		rest on savings and temporary cash investments			<u></u>		
4		dends and interest from securities					3,596
5		rental income or (loss) from real estate	+ ,-	-	1,	the telligible	3,390
		Debt-financed property			-		<del> `</del>
		Not debt-financed property					
6		rental income or (loss) from personal property				- "	
7		er investment income					
8	Gair	or (loss) from sales of assets other than inventory					186
9		income or (loss) from special events					100
10		ss profit or (loss) from sales of inventory					
11		er revenue a					
	b						
	c						
	d						
	е						
12	Sub	total Add columns (b), (d), and (e)		0	2 4	0	3,782
13	Tota	al. Add line 12, columns (b), (d), and (e)				13	
		ksheet in line 13 instructions to verify calculations					
Pa	rt XV	I-B Relationship of Activities to the A	ccomplishm	ent of Exempt	Purposes		
	e No. ▼	accomplishment of the foundation's exempt pur	poses (other than	olumn (e) of Part > by providing fund	CVI-A contributed s for such purpos	importantly to the es) (See instructi	ons)
	4	SOURCE OF INCOME TO PROVIDE SCHOLA					
	8	SOURCE OF INCOME TO PROVIDE SCHOLA	ARSHIPS		·		
							<del></del>
				·-· ·			
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			<del></del>	<del></del>	·		
			<del> </del>				
		<del> </del>					

Firm's address ► 345 WALNUT, COLORADO CITY, TX 79512

(325) 728-2452 Form **990-PF** (2017)

Phone no

Form 99	0-RF (2	017) LEE J & E	BILLIE B WOODS M	EMORIAL SCHOLARSHIP	FUND			20-7369859	Pa	ge <b>13</b>
Part	XVII	Information Exempt Org		sfers to and Transacti	ons and Re	elationships	With No	ncharitable		
1	Did th			ngage in any of the followi	ng with any of	ther organization	on describe	ed at 15	Yes	No
•		_		)(3) organizations) or in se		•		· .	, ,	1.0
		nizations?		/(-/ gaa)					٠,	
а	_		porting foundation to	a noncharitable exempt or	ganization of			1		1
_	(1) C		orang roundation to	a nononanable exempt of	garnzanon or			1a(1)		X
		ther assets						1a(2)		X
b		r transactions			•			1:5(2)		<u> </u>
~			a noncharitable exer	mpt organization				1b(1)		X
				ble exempt organization		•		1b(2)	<del></del>	X
			equipment, or other	. •				1b(3)	<del>                                     </del>	X
		eimbursement ar		400010				1b(4)		X
		oans or loan gua	-				•	1b(5)		X
		_		ip or fundraising solicitation	ne	•		1b(6)		X
С				ts, other assets, or paid en				1c	<del> </del>	X
d				nplete the following schedule		should always s	how the fair		L	
ū	value	of the goods, other	er assets, or services o	given by the reporting foundatent, show in column (d) the vent,	ation. If the fou	ndation receive	d less than f	fair market		
(a) Line	no	(b) Amount involved	(c) Name of none	charitable exempt organization	(d) De	scription of transfei	rs, transaction:	s, and shanng агга	ngemei	nts
								•		
		•								
_										
			1						•	
			1							
-		·								
		· · ·								
				,						
2a b	desc	ribed in section 5		ated with, or related to, one ction 501(c)(3)) or in section		exempt organı	zations	☐ Yes	X N	10
		(a) Name of organ	nization	(b) Type of organiza	ition		(c) Description	n of relationship		
			-							
			•							
	Under	penalties of perjury, I dec	clare that I have examined this re	etum, including accompanying schedules	and statements, and	to the best of my kno	wledge and belie	ef, it is true,		
Sign Here	correc	it, and complete Declarate	1	eyer) is based on all information of which	preparer has any kni TRUSTEE	owledge		May the IRS discuss with the preparer sho		w?
	Sigi	nature of officer or trus	tee	Date T	itle			See manuchons	کا بوع	∐ No
ם:-		Print/Type preparer's	s name	Preparerys signature	Ald 1.	Date	Check	X if PTIN		
Paid		RON MCCLUNG	G	1 Kon Wu	J' (Clar)	5/8/2018	8 self-en	nployed P0198	1371	
Prepa		Firm's name	RON MCCLUNG C	PA LLC			Firm's EIN 🕨	81-3444841		
Use C	nıy	Eurm's address .		ORADO CITY TX 79512			Phone no	(325) 728-24	52	

Than Inventory	
Other.	
Assets	
n Sale of	
ss fron	
- Gain/Lo	
(990-PF)	
I, Line 6	
Part	

								Totals.	Gross	SS	Cost or Other Basis, Expenses,	isis, Expenses,	Net Gam	am
	Amount								Sales	S	Depreciation and Adjustments	d Adjustments	or Loss	SS
Long Term CG Distributions	0	r <del>.                                    </del>					S	Capital Gains/Losses		0		0		0
Short Term CG Distributions	0	Tæ						Other sales		8,635		8,449		186
		-		Check "X" if									i	
		Check "X"		Purchaser							Expense of Sale			
		to include		ısa	Acquisition	Date	Date	Gross Sales	Cost or	Valuation	and Cost of			Net Gain
Description	CUSIP#	In Part IV	Purchaser	Business	Method	Acquired	Sold	Price	Other Basis	Method	Improvements	Depreciation	Adjustments	or Loss
1   FEDERATED MID CAP FUND						12/30/2016	1/5/2017	1,000	986					14
2   FEDERATED BOND FUND						3/29/2012	1/5/2017	1,500	1,516					-16
3 FEDERATED BOND FUND						3/29/2012	12/22/2017	000'9	5,947					53
4 CAPITAL GAIN DISTR								135						135

Part I, Line 16b (990-PF) - Accounting Fees

		150	150	0	0
•					Disbursements
		Revenue and			for Charitable
		Expenses per	Net Investment	Adjusted Net	Purposes
	Description	Books	Income	Income	(Cash Basis Only)
1	RON MCCLUNG CPA LLC	150	150		0
2		0			0
3		0			0
4		0			0
5		0			0
6		0			0
7		0			0
8		0			0

Part I, Line 18 (990-PF) - Taxes

		218	0		0
	Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	FED EXCISE TAX	218			
2		0			
3		0			
4		0			<u> </u>
5		0			
6		0			
7		0			
8		0			<u> </u>

Part II, Line 10a (990-PF) - Investments - U.S. and State Government Obligations

	,	_		_				-		_		1	_
		State/Local	Obligation										
/6,480	0	FMV	End of Year	6,368	918/69	က	234						
74,199	0	FMV	Beg of Year	1,316	72,677	3	203						
/6,029	0	Book Value	End of Year	986'9	69,406	3	234						
75,517	0		Beg. of Year	1,316	73,995	က	203						
Federal	State/Local	Num Shares/	Face Value										
			Description	1 FEDERATED MID CAP FUND	2 FEDERATED BOND FUND	3 FEDERATED INCOME TRUST	4 FEDERATED GOVT OBLIGATION	2	9	7	8	6	10
		Щ.		L.	Ц.,		Щ	Ĺ	<u> </u>	L			L

Part II, Line 10b (990-PF) - Investments - Corporate Stock

			13,005	13,005	17,848	17,039
		Num. Shares/	Book Value	Book Value	FMV	FMV
	Description	Face Value	Beg of Year	End of Year	<u>_</u>	End of Year
_	AT&T	200	6,285	6,285	19	7.776
7	VERIZON	200	6,720	6,720	9,342	9,263
က						
4						
2						
9						
7						
∞						
6						

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Trustees
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Officers, D
sation of (
- Compen
(990-PF)
II, Line 1
Part VIII, Li

1	-1		-1		
Expense	Account				
ı	Benefits	0			
Avg Hrs	Compensation	882		0	0
Avg Hrs	Per Week	0 02			
	Tife	TRUSTEE			
	Foreign Country				
	Zip Code	TX 79512-1031			
	State	ΧL			
		COLORADO CITY			
Check "X"	at.				
Check "X"	if Business	×			
		CITY NATIONAL BANK	_	-	<b>y</b> 60
L				l	ــــــــــــــــــــــــــــــــــــــ

Part XIII, Line 2a, Column C (990-PF) - Prior Year Undistributed Income		
1 Distributable amounts for 2016 that remained undistributed at the beginning of the 2017 tax year	1	556
2	2	
3	3	
4	4	
5	5	
6	6	
7	7	
8	8	
9	9	
10 Total	10	556