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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

## DLN: 93491319042558

2017

OMB No 1545-0052

## **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.
 ▶ Information about Form 990-PF and its instructions is at <a href="www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

Open to Public Inspection

A Employer interinfection number 2 2-7529755  Nominal and anotal of PB be number if mail is not delivered to strate address?  Nominal and anotal of PB be number if mail is not delivered to strate address?  Other Stown, statike processe, causery, and 28 or thorogy postal case.  Other Stown, statike processe, causery, and 28 or thorogy postal case.  Other Stown, statike processe, causery, and 28 or thorogy postal case.  Other Stown, statike processe, causery, and 28 or thorogy postal case.  Other Stown, statike apply   Insteal return   Insteal return of a former public change   2 interest agenciation is particularly in the processes.  Other Stown, 1987, 2019, 1987, 2019,	For	cale	ndar year 2017, or tax year beginning 01-01-20	)17 , ar	nd ending 12-31-	2017	
2-7-22-775   27-7-22-775   2					A Employer ıd	entification numbe	r
Comprehensive content to the foliation of the foliation					23-7250795		
Contribution, state or arounds, country, and ZZP or fare-opt pooled code  C C Hearthful, All, about the state of the state				Room/suite	· ·	·	ns)
## Country Department of the Foundation is not required to attach schedule   2 Center Department   Center	Citi	or tarre	a state or province sountry and ZID or forces and all		(251) 952-5810	1	
Final return					<b>C</b> If exemption	application is pendin	g, check here
Access type of organization   Manage change   Manage change   Money of 27(2)(1) in moneympt charitable trust   Other transbe private foundation	<b>G</b> Ch	neck al	ll that apply 🔲 Initial return 🔲 Initial return of a	former public charity	<b>D 1.</b> Foreign or	ganızatıons, check he	ere 🛴
M Creek type of organization			$\square$ Final return $\square$ Amended return				
## Check type of organization ## Che			Address change 🔲 Name change				—
Far market value of all assets at end of large sets at end of large (see five from 1)   Other	H Ch	neck ty		foundation			
Analysis of Revenue and Expenses (The total of must be on cash basis	<u></u>	Section					
of amounts in columns (b), (c), and (g) mey not necessary embedded the amounts in columns (b), (c), and (g) mey not necessary embedded income (g) the investment (g)	of '	year <i>(f</i>	from Part II, col (c), ▶\$ 36.122.464 □ Other (specify) _				
Contributions, gifts, grants, etc., received (attach schedule)   Contributions gifts, grants, etc., received (attach schedule)   Contributions, gifts, grants,	Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and			
1 Contributions, gifs, grants, etc , received (attach schedule)   2 Check				expenses per			purposes
2   Check				1			(cash basis only)
Sch B   3   Interest on savings and temporary cash investments   996   996		•					
1	erkie	2					
10   13   15   15   15   15   15   15   15		_		006	006		
13,260   1			- · · · · · · · · · · · · · · · · · · ·				
10		-					
The content of the							
8		6a	Net gain or (loss) from sale of assets not on line 10	1,649,173			
8		ь	Gross sales price for all assets on line 6a				
8	žeĶ	_	3,218,339		4.640.473		
9   Income modifications	ш				1,649,1/3		
10a   Gross sales   less returns and allowances   Less Cost of goods sold   C   Gross profit or (loss) (attach schedule)   C   Gross profit or (loss) (attach schedu		_	• •			400.000	
B   Less Cost of goods sold		-	I			,	
11   Other income (attach schedule)   12   Total. Add lines 1 through 11   2,147,477   2,147,477   400,000   24,000   3   40,000   3		ь					
12   Total. Add lines 1 through 11   2,147,477   2,147,477   400,000		С	Gross profit or (loss) (attach schedule)				
13   Compensation of officers, directors, trustees, etc   24,000   0   24,000     14   Other employee salaries and wages       15   Pension plans, employee benefits       16a   Legal fees (attach schedule)       17   Interest       18   Taxes (attach schedule)       19   Depreciation (attach schedule)   and depletion       19   Depreciation (attach schedule)   and depletion       19   Depreciation (attach schedule)       19   Depreciation (attach schedule)       20   Occupancy		11	Other income (attach schedule)				
14 Other employee salaries and wages   253,304   0   253,304     15 Pension plans, employee benefits   6,822   0   6,822     16a Legal fees (attach schedule)   23,415   11,707   11,707     11,707   11,707     11,707   11,707     12,707   12,707     13,433   20,300     17 Interest   34,433   34,0165   20,391   19,774     18 Taxes (attach schedule)   34,165   20,391   19,774     19 Depreciation (attach schedule) and depletion   34,0165   20,391   19,774     20 Occupancy   37,122   0   37,122   0     21 Travel, conferences, and meetings   55   0   55     22 Printing and publications   35   114,101   14,053   100,048     24 Total operating and administrative expenses   Add lines 13 through 23   37,438   37,438     25 Contributions, gifts, grants paid   1,366,695   1,366,695     26 Total expenses and disbursements   Add lines 24 and 25   20,38,547   196,286   1,837,138     27 Subtract line 26 from line 12   a Excess of revenue over expenses and disbursements   58,930   100,000     28 Dept. Subtract line 26 from line 10   1,951,191   1,951,191     29 Contributions, gifts, grants paid   1,951,191   1,951,191   1,900,000     20 Occupancy   34,9190   14,757   34,433   34		12	Total. Add lines 1 through 11	2,147,477	2,147,477	400,000	
15   Pension plans, employee benefits		13	Compensation of officers, directors, trustees, etc	24,000	0		24,000
16a   Legal fees (attach schedule)   23,415   11,707   11,707   11,707     b   Accounting fees (attach schedule)   24,9190   14,757   34,433     c   Other professional fees (attach schedule)   21,55,678   135,378   20,300     17		14	Other employee salaries and wages	253,304	0		253,304
17   Interest   18   Taxes (attach schedule) (see instructions)   19   40,165   20,391   19,774     19   Depreciation (attach schedule) and depletion   19,774     20   Occupancy   17   Travel, conferences, and meetings   17   17   17   17   17     21   Travel, conferences, and meetings   17   17   17   17     22   Printing and publications   17   17   17     23   Other expenses (attach schedule)   17   17   17     24   Total operating and administrative expenses.   17   18     25   Contributions, gifts, grants paid   17   17     26   Total expenses and disbursements. Add lines 24 and 25   2,038,547   196,286   1,837,138     27   Subtract line 26 from line 12   2   2     a   Excess of revenue over expenses and disbursements   108,930   1,951,191     b   Net investment income (if negative, enter -0-)   1,951,191   400,000	es	15	Pension plans, employee benefits	6,822	0		6,822
17   Interest   18   Taxes (attach schedule) (see instructions)   19   40,165   20,391   19,774     19   Depreciation (attach schedule) and depletion   19,774     20   Occupancy   17   Travel, conferences, and meetings   17   17   17   17   17     21   Travel, conferences, and meetings   17   17   17   17     22   Printing and publications   17   17   17     23   Other expenses (attach schedule)   17   17   17     24   Total operating and administrative expenses.   17   18     25   Contributions, gifts, grants paid   17   17     26   Total expenses and disbursements. Add lines 24 and 25   2,038,547   196,286   1,837,138     27   Subtract line 26 from line 12   2   2     a   Excess of revenue over expenses and disbursements   108,930   1,951,191     b   Net investment income (if negative, enter -0-)   1,951,191   400,000	sue	16a	Legal fees (attach schedule)		11,707		11,707
17   Interest   18   Taxes (attach schedule) (see instructions)   19   40,165   20,391   19,774     19   Depreciation (attach schedule) and depletion   19,774     20   Occupancy   17   Travel, conferences, and meetings   17   17   17   17   17     21   Travel, conferences, and meetings   17   17   17   17     22   Printing and publications   17   17   17     23   Other expenses (attach schedule)   17   17   17     24   Total operating and administrative expenses.   17   18     25   Contributions, gifts, grants paid   17   17     26   Total expenses and disbursements. Add lines 24 and 25   2,038,547   196,286   1,837,138     27   Subtract line 26 from line 12   2   2     a   Excess of revenue over expenses and disbursements   108,930   1,951,191     b   Net investment income (if negative, enter -0-)   1,951,191   400,000	ά	ь	Accounting fees (attach schedule)	49,190	14,757		34,433
23 Other expenses (attach schedule)	eЕ	С	Other professional fees (attach schedule)	155,678	135,378		20,300
23 Other expenses (attach schedule)	ativ	17	Interest	_			
23 Other expenses (attach schedule)	Str	18	, , ,				19,774
23 Other expenses (attach schedule)	<u>=</u>	19	Depreciation (attach schedule) and depletion	5,122	0		
23 Other expenses (attach schedule)	Act		• •				
23 Other expenses (attach schedule)	ק		· · · · · · · · · · · · · · · · · · ·	55	0		55
26 Total expenses and disbursements. Add lines 24 and 25	J		•	<b>114 101</b>	14.053		100.048
26 Total expenses and disbursements. Add lines 24 and 25	ţ			729 114,101	14,033		100,040
26 Total expenses and disbursements. Add lines 24 and 25	era	24		671.852	196.286		470,443
26 Total expenses and disbursements. Add lines 24 and 25 2,038,547 196,286 1,837,138  27 Subtract line 26 from line 12 2 200,000 100,0	О	25	•				<u> </u>
27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income(if negative, enter -0-)			Total expenses and disbursements. Add lines 24 and				
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income(if negative, enter -0-)		27		2,038,547	196,286		1,837,138
disbursements b Net investment income (if negative, enter -0-) c Adjusted net income(if negative, enter -0-)				108.930			
c Adjusted net income(if negative, enter -0-) 400,000			disbursements	,,,,,			
			· -		1,951,191	400.000	
	For		work Reduction Act Notice, see instructions.		Cat No 11289>	· ·	m <b>990-PF</b> (2017)

- 6	17.	Balance Sheets	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	-1		
	2	Savings and tempo	rary cash investments	895,799	1,021,841	1,021,841
	3	Accounts receivable	e <b>▶</b>			
		Less allowance for	doubtful accounts >			
	4	Pledges receivable	<u> </u>			
		Less allowance for	doubtful accounts			
	5	Grants receivable	· · · · · · · · · · · · · · · · · · ·			
	6		om officers, directors, trustees, and other			
		disqualified persons	s (attach schedule) (see instructions)			
	7	· ·	ans receivable (attach schedule) ▶			
	-		doubtful accounts			
	8		e or use			
ets	9		and deferred charges			
Assets	10a		and state government obligations (attach schedule)			
_	ь		orate stock (attach schedule)			
	c	·	orate bonds (attach schedule)			
	11	·	, buildings, and equipment basis			
			depreciation (attach schedule) ▶	•		
	12		gage loans			
	13		r (attach schedule)	18,743,918	18,729,625	25,794,564
	14		d equipment basis ► 4,978,845	20// 10/220	29, 23,828	20,75 1,00 1
			depreciation (attach schedule) ► 40,711	4,943,256	<b>4</b> ,938,134	4,938,134
	15		ribe ►)	3,965,014		
	16		e completed by all filers—see the	3,503,614	229 +,307,323	1,307,323
	10	•	see page 1, item I)	28,547,986	29,057,525	36,122,464
	4.7	·	and accrued expenses	4,069		
	17 18			4,009	4,076	-
Ş	19					-
≝	20		directors, trustees, and other disqualified persons			-
Liabilities	21		er notes payable (attach schedule)			-
ニ	22		scribe			-
	23		dd lines 17 through 22)	4,069	4,678	-
	23	Total habinties(at	du mes 17 tinough 22)	1,003	1,676	
s			follow SFAS 117, check here 🕨 🗹			
ce		_	es 24 through 26 and lines 30 and 31.			
Balanc	24	Unrestricted		28,543,917	29,052,847	
ä	25	Temporarily restric				
Fund	26	Permanently restric	cted			
Ξ.		Foundations that	do not follow SFAS 117, check here 🕨 🗌			
ō		and complete line	es 27 through 31.			
ets	27	Capital stock, trust	principal, or current funds			
Assets	28	Paid-in or capital si	urplus, or land, bldg , and equipment fund			
	29	Retained earnings,	accumulated income, endowment, or other funds			
Net	30	Total net assets of	or fund balances (see instructions)	28,543,917	29,052,847	
	31	Total liabilities a	nd net assets/fund balances (see instructions) .	28,547,986	29,057,525	
Pa	rt III	Analysis of Ch	nanges in Net Assets or Fund Balances			
1	Tota	I net assets or fund	balances at beginning of year—Part II, column (a), lin	ie 30 (must agree with	end-	

of-year figure reported on prior year's return) 28,543,917 2 Enter amount from Part I, line 27a 2 108,930

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

3

4

5

6

400,000 29,052,847

29,052,847 Form **990-PF** (2017)

3 Other increases not included in line 2 (itemize) ▶ \_\_

Decreases not included in line 2 (itemize) ▶ \_

Page **3** 

	(a) the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1 a TRUST COMPANY OF AMI	ERICA		Р		
<b>b</b> CAPITAL GAINS DIVIDEN	IDS		Р		
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain o	h) r (loss) ) minus (q)
<b>a</b> 2,69	8,432		1,569,166		1,129,266
	9,907				519,907
С					
d					
<b>e</b>					
	s showing gain in column (h) and ow	ned by the foundation (	on 12/31/69	,	I)
(i) F M V as of 12/31/69	(i)  Adjusted basis as of 12/31/69	Excess	( <b>k</b> ) of col (ı) (j), ıf any	Gains (Col ( col (k), but not	l) h) gain minus less than -0-) <b>or</b> om col (h))
a			,		1,129,266
b					519,907
С					
d					
e					
·	gain or (loss) s defined in sections 1 rt I, line 8, column (c) (see instructions)	` , ` , ` ,	Part I, line 7	3	1,649,173
Part V Qualification U	Jnder Section 4940(e) for Re	duced Tax on Net	Investment Inc	come	
_	rivate foundations subject to the sec				
if section 4940(d)(2) applies, le	•	ction 4940(a) tax on he	et investment incom	e )	
	e section 4942 tax on the distributal ot qualify under section 4940(e) Do		in the base period?	Ye	es 🔽 No
1 Enter the appropriate an	nount in each column for each year,	see instructions before	making any entries		
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	<b>(d)</b> Distribution rati (col (b) divided by c	
2016	2,651,079		23,831,107		0 111244
2015	2,199,644		25,861,057		0 085056
2014	2,174,565		29,362,943		0 074058
2013	2,307,674		28,118,018		0 082071
2012	1,779,714		25,835,065	T	0 068888
2 Total of line 1, column (	•		2		0 421317
number of years the four	o for the 5-year base period—divide to adation has been in existence if less	than 5 years	3		0 084263
	ncharitable-use assets for 2017 from	n Part X, line 5	4		1,034,611
<b>5</b> Multiply line 4 by line 3			5		87,179
	ent income (1% of Part I, line 27b)		6		19,512
<b>7</b> Add lines 5 and 6			7		106,691
	ons from Part XII, line 4 , eater than line 7, check the box in Pa		<b>8</b> oplete that part usin	 g a 1% tax rate Se	1,837,138 e the Part VI
instructions			· 		

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?.

7b

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

List all officers, directors, trustee  (a) Name and address		Title, and average hours per week	(c) Compensation (If not paid, enter	(see instructions). (d) Contributions to employee benefit plans and deferred	Expense account, (e) other allowances
	(	<b>b)</b> devoted to position	-0-)	compensation	(-,
See Additional Data Table					
2 Componentian of five highest na	<u> </u>	nnlovees (ether than t	hose included on line 1	soo instructions). If no	no ontor "NONE "
2 Compensation of five highest-pa	ia ei		nose included on line 1	Contributions to	ie, enter NONE.
(a) Name and address of each employee pa more than \$50,000	ııd	Title, and average hours per week  (b) devoted to position	(c) Compensation	employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
THOMAS E LEE		GRANT DIRECTOR	126,65	0 6,822	C
PO BOX 2259		140 00			
FOLEY, AL 36536 BRENDA LEE		EXECUTIVE DIRECTOR	126,65	2 0	
PO BOX 1423		40 00	120,03		·
FOLEY, AL 36536					
		_			
		-			
		1			
<b>Total</b> number of other employees paid ov					C
3 Five highest-paid independent co					
(a) Name and address of each person	n pai	d more than \$50,000	( <b>b)</b> Type	e of service	(c) Compensation
NONE			1		
			_		
			-		
			1		
Total number of others receiving over \$50	,000	) for professional services			(
Part IX-A Summary of Direct (					
List the foundation's four largest direct charitable organizations and other beneficiaries served, con				ation such as the number of	Expenses
1 OPERATION COSTS OF THE SNOOK TE	LEPI	HONE MUSEUM			57,410
2					
2					
<u> </u>					
-					
4					
Part IX-B Summary of Program			·	12	A
Describe the two largest program-related inve	estme	ints made by the foundation d	uring the tax year on lines 1	and 2	Amount
2					
All other programs watch discounts.	C	inchalchio			
All other program-related investments	see	INSTRUCTIONS			r
<del>_</del>					

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . . . . . . . . .

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

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

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

Amounts set aside for specific charitable projects that satisfy the

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

2

3

4

5

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

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

1a

1b

2

3a 3h

4

5

1,837,138

1.837.138

1.817.626

Form **990-PF** (2017)

19.512

432,219

432,219

Form 990-PF (2017)

0

(d)

2017

Form 990-PF (20	017)	
Part XIII	Undistributed Income	(see instructions)

d From 2015. . . .

Distributable amount for 2017 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2017 a Enter amount for 2016 only. . . . . . **b** Total for prior years

e Remaining amount distributed out of corpus

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

6 Enter the net total of each column as

indicated below:

**5** Excess distributions carryover applied to 2017

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . . . . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018 . . . . . 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . . . . . . 8 Excess distributions carryover from 2012 not

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

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

9 Excess distributions carryover to 2018.

10 Analysis of line 9

a Excess from 2013. . .

c Excess from 2015. . . .

d Excess from 2016. . . e Excess from 2017. . .

**b** Excess from 2014. .

same amount must be shown in column (a) )

Excess distributions carryover, if any, to 2017 From 2012. . . . .

**b** From 2013. . . . c From 2014. . .

509.007 938,961 e From 2016. . . . .

744 550 935.135 f Total of lines 3a through e. . . . . . . .

1,489,506 4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ 1,837,138

a Applied to 2016, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). . . . . c Treated as distributions out of corpus (Election

**d** Applied to 2017 distributable amount. . . .

required—see instructions). . . . . . . . . .

938.961

744,550

935.135

1,489,506

1.404.919

1,404,919

6,022,078

509.007

5,513,071

4.617.159

(a)

Corpus

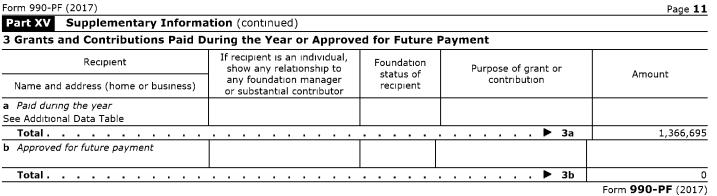
(b)

Years prior to 2016

(c)

2016

Forr	n 990-PF (2017)					Page <b>10</b>
P	art XIV Private Operating Found	lations (see instr	uctions and Part V	/II-A, question 9)		
	If the foundation has received a ruling or de foundation, and the ruling is effective for 20	)17, enter the date o	of the ruling	▶∟_		
	Check box to indicate whether the organizat	ion is a private oper	ating foundation des	scribed in section	l 4942(j)(3) or ∟	4942( <sub>J</sub> )(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 each	(a) 2017	<b>(b)</b> 2016	(c) 2015	(d) 2014	
ь	year listed					
	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3					
	of minimum investment return shown in Part X, line 6 for each year listed					
c	"Support" alternative test—enter					
	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments					
	on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii) (3) Largest amount of support					
	from an exempt organization					
	(4) Gross investment income	(0 1 :		L		
Pa	rt XV Supplementary Information assets at any time during the			organization nad	1 \$5,000 or more	e in
1	Information Regarding Foundation Man	agers:	•			
а	List any managers of the foundation who have before the close of any tax year (but only if					n
	MARJORIE Y SNOOK	they have contribut	tea more than \$5,00	o, (see seedon so,	(4)(2))	
b	List any managers of the foundation who ow				arge portion of the	
	ownership of a partnership or other entity)	of which the founda	tion has a 10% or gr	reater interest		
		. 6'0' 1 6				
2	Information Regarding Contribution, Gr			_		
	Check here ▶ ☐ If the foundation only make unsolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, a	ition makes gifts, gr				der
a	The name, address, and telephone number	or e-mail address of	the person to whom	n applications should	be addressed	
	THE SNOOK FOUNDATION					
	PO BOX 1267 FOLEY, AL 36536					
	(251) 952-5810					
	INFO@SNOOKFOUNDATION COM					
b	The form in which applications should be su APPLICATION FORM CAN BE OBTAINED FRO			·	2-5810	
c	Any submission deadlines NONE					
d	Any restrictions or limitations on awards, su factors	ch as by geographic	cal areas, charitable i	fields, kinds of institu	utions, or other	
	TO QUALIFY FOR FUNDING FROM THE SNOO ORIGINAL GULF TELEPHONE SERVICE AREA RIVER/MARLOW/SUMMERDALE, AND SOUTH FALL INTO THIS GEOGRAPHICAL COVERAGI DIRECTLY IMPACT THE RESIDENTS OF THIS	WHICH ENCOMPAS THROUGH FOLEY A AREA, CONSIDERA	SES NORTH TO LOX AND GULF SHORES/ ATION MAY BE GIVEN	LEY AND STAPLETON ORANGE BEACH IF A N IF THEY ARE ABLE	I, EAST TO LILLIAN, A GROUP OR ORGANI TO SHOW HOW FUN	WEST TO FISH IZATION DOES NOT DING WILL



Enter gross	s amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
<b>1</b> Progran	n service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	function income (See instructions )
a						
2 Membe	and contracts from government agencies ership dues and assessments					
	est on savings and temporary cash tments					996
	nds and interest from securities					484,048
	ntal income or (loss) from real estate					
	-financed property					13,260
	ental income or (loss) from personal property					13,260
	investment income.					
8 Gain	or (loss) from sales of assets other than tory					1,649,173
	come or (loss) from special events					
	profit or (loss) from sales of inventory revenue a					
	revenue u					
с						
						0 0117.17
12 Subtot 13 Total.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)		0		B	0 2,147,477 2,147,477
(See w	orksheet in line 13 instructions to verify calcu	lations )				2,11,11,
Part XV	Explain below how each activity for which	-		•		_
Line No. ▼	the accomplishment of the foundation's ex instructions )					o
3	PROVIDES THE FUNDS TO BE USED TO AWA					
4	PROVIDES THE FUNDS TO BE USED TO AWA					
8	PROVIDES THE FUNDS TO BE USED TO AWA	ARD GRANTS				
	1					
	1					
	1				F	orm <b>990-PF</b> (2017)

orm 9	90-PF (2	2017)							Pa	ge <b>13</b>
Pari	XVII	Information Re Exempt Organi		ransfers To a	ind Transactio	ns and Relati	ionships With Nonchar	itable		
		anization directly or in ode (other than sectio					tion described in section 501 al organizations?		Yes	No
a Tra	nsfers fr	om the reporting foun	dation to a n	oncharitable exe	empt organization	of				
(1	Cash.							1a(1)		No
(2	Other	assets						1a(2)		No
<b>b</b> Oth	er trans	actions								1
(1	Sales	of assets to a nonchar	ıtable exemp	t organization.				1b(1)		No
(2	Purcha	ases of assets from a r	noncharitable	exempt organiz	ation			1b(2)		No
•		of facilities, equipmer	•					1b(3)		No
-		ursement arrangemen						1b(4)		No
•		or loan guarantees.						1b(5)		No
•		nance of services or m	•	-				1b(6)		No
	-	facilities, equipment, n	-	· ·			always show the fair market	1c		No
	ny tran:		ngement, sh		l) the value of the	goods, other as	ved less than fair market val sets, or services received of transfers, transactions, and sh		ngemen	nts
							·			
	_									
de	cribed ii	dation directly or indirent on section 501(c) of the mplete the following si (a) Name of organization	Code (other	than section 50		tion 527?		Yes	<b>V</b>	No
		•								
	_									
	of my which		, it is true, c				rying schedules and stateme er than taxpayer) is based or			
Sign Here		****	rustoo		2018-11-14	****** Title	retur with below	the prepai v _	rer shov	wn
		ignature of officer or t	rustee	T	Date	' Title	(see	ınstr )? 🖣	✓ Yes	□No
		Print/Type preparer's	name	Preparer's Sign	ature	Date	Check if self- employed ▶ □	P00415	5103	

Paid

STEVEN G SLAUGHTER 2018-11-14 CPA **Preparer** Firm's name ▶ JOHNSON SLAUGHTER DRIVER & NORTHCUTT PA Firm's EIN ▶63-0588313 **Use Only** Firm's address ▶ PO BOX 489 Phone no (251) 943-1565 FOLEY, AL 365360489

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, not paid, enter Contributions to (e) other allowances hours per week (b) devoted to position -0-) employee benefit plans and deferred compensation MARJORIE Y SNOOK TRUSTEE 5 00 PO BOX 420 SUMMEDIALE AL 36580

SOMMERDALE, AL 30380				
ROSEMARY JOHNSTON	TRUSTEE	6,000	0	0
12425 JOHN ARTHUR DRIVE FOLEY, AL 36535	5 00			
MELANIE I SMITH	TDIICTEE	6,000	0	0

12425 JOHN ARTHUR DRIVE FOLEY, AL 36535				
MELANIE LSMITH	TRUSTEE	6,000	0	
385 ROLAN GOOCH ROAD HAZEL GREEN, AL 35750	5 00			

	INOSTEE	0,000	9	·
385 ROLAN GOOCH ROAD HAZEL GREEN, AL 35750	5 00			
WILLIAM L LAMBERT	TRUSTEE	6,000	0	0
1EGGE DAUGUEDTY DOAD	5 00			

385 ROLAN GOOCH ROAD HAZEL GREEN, AL 35750				
WILLIAM L LAMBERT	TRUSTEE	6,000	0	(
15665 DAUGHERTY ROAD	5 00			

WILLIAM L LAMBERT	TRUSTEE	6,000	0	C
15665 DAUGHERTY ROAD FOLEY, AL 36535	5 00			

15665 DAUGHERTY ROAD FOLEY, AL 36535	3 00			
M MORT SWAIM	TRUSTEE	6 000	0	

M MORT SWAIM	TRUSTEE	6,000	0	
235 WEST LAUREL AVENUE FOLEY, AL 36535	5 00			

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
ALABAMA FREE CLINICPO BOX 1284 BAY MINETTE, AL 36507	NONE	PC	ENABLE RECIPIENT TO PROVIDE NO COST MEDICAL SERVICES TO INDIGENT ADULTS AND ADULTS WITHOUT HEALTH INSURANCE	25,000
ALABAMA KIDNEY FOUNDATION 2012 UNIVERSITY BLVD BIRMINGHAM, AL 35233	NONE	PC	ENABLE RECIPIENT TO PROVIDE FINANCIAL ASSISTANCE TO PATIENTS	2,500
BALDWIN COUNTY CHILDREN'S FOUNDATION P O BOX 7889 SPANISH FORT, AL 36577	NONE	PC	ENABLE RECIPIENT TO PROVIDE SUPPORT/ADVOCACY TO CHILDREN AND SINGLE PARENTS INVOLVED WITH THE BALDWIN COUNTY FAMILY COURTENABLE RECIPIENT TO PROVIDE SUPPORT/ADVOCACY TO CHILDREN AND SINGLE PARENTS INVOLVED WITH THE BALDWIN COUNTY FAMILY COURT SYSTEM	15,000

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### Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year BALDWIN COUNTY DRUG COURT NONE PC THE FOUNDATION SPONSORED 10,000 **FOUNDATION** A TABLE AT THE 8TH ANNUAL P O BOX 100 BALDWIN COUNTY DRUG COURT BAY MINETTE, AL 36507 FOUNDATION COMMUNITY AWARENESS EVENT 3,000

			AWARENESS EVERT	
BALDWIN COUNTY SHERIFFS BOYS RANCH P O BOX 157 SUMMERDALE, AL 36580	NONE	PC	ENABLE RECIPIENT TO FUND UTILITIES, FUEL, INTERNET AND PHONE COSTS	
BALDWIN COUNTY EDUCATION	NONE	DC	ENABLE DECIDIENT TO BROVIDE	

P O BOX 157 SUMMERDALE, AL 36580			PHONE COSTS	
BALDWIN COUNTY EDUCATION COALITION 502   FE AVE	NONE	PC	ENABLE RECIPIENT TO PROVIDE ASSITANCE TO INDIGENT FAMILIES	

JOHN LENDY LEEP THE GOOD				
BALDWIN COUNTY EDUCATION COALITION 502 LEE AVE SUMMERDALE, AL 36580	NONE	PC	ENABLE RECIPIENT TO PROVIDE ASSITANCE TO INDIGENT FAMILIES	

Total .

За

COALITION 502 LEE AVE SUMMERDALE, AL 36580	NONE	<b>,</b>	ASSITANCE TO INDIGENT FAMILIES	

BALDWIN COUNTY EDUCATION	NONE	PC	ENABLE RECIPIENT TO PROVIDE	8,939
COALITION			ASSITANCE TO INDIGENT	
502 LEE AVE			FAMILIES	
SUMMERDALE, AL 36580				

				ı
BALDWIN COUNTY EDUCATION	NONE	PC	ENABLE RECIPIENT TO PROVIDE	
COALITION			ASSITANCE TO INDIGENT	I
502 LEE AVE			FAMILIES	I

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
ECUMENICAL MINISTRIES 102 W SPRUCE AVE FOLEY, AL 36535	NONE	PC	ENABLE RECIPIENT TO PROVIDE ASSISTANCE TO INDIGENT FAMILIES	15,000
BCBEELBERTA MIDDLE SCHOOL BAND 13355 MAIN STREET ELBERTA, AL 36530	NONE	GOV	ENABLE RECIPIENT TO PURCHASE BAND EQUIPMENT	3,500
BCBEELBERTA HIGH SCHOOL 1355 MAIN STREET ELBERTA, AL 36530	NONE	GOV	ENABLE RECIPIENT TO PURCHASE ATHLETIC UNIFORMS AND EQUIPMENT	45,000

1,366,695 Total . . .

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orm 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
BCBEFOLEY HIGH SCHOOL 1 PRIDE PLACE FOLEY, AL 36535	NONE	GOV	ENABLE RECIPIENT TO PURCHASE FOOTBALL UNIFORMS AND EQUIPMENT	3,000	
BCBEFOLEY INTERMEDIATE SCHOOL 2000 SOUTH CEDAR STREET FOLEY, AL 36535	NONE	GOV	ENABLE RECIPIENT TO PURCHASE SCHOOL EQUIPMENT	5,000	
FEEDING GULF COAST5248 MOBILE ST	NONE	GOV	ENABLE RECIPIENT TO PROVIDE	6,750	

BCBEFOLEY INTERMEDIATE SCHOOL 2000 SOUTH CEDAR STREET FOLEY, AL 36535	NONE	GOV	ENABLE RECIPIENT TO PURCHASE SCHOOL EQUIPMENT	5,000
FEEDING GULF COAST5248 MOBILE ST	NONE	GOV	ENABLE RECIPIENT TO PROVIDE	6,750

FOLEY, AL 36535				
FEEDING GULF COAST5248 MOBILE ST THEODORE, AL 36582	NONE	GOV	ENABLE RECIPIENT TO PROVIDE ASSISTANCE TO INDIGENT	6

Total . . . . . .

За

FEEDING GULF COAST5248 MOBILE ST THEODORE, AL 36582	NONE	GOV	ENABLE RECIPIENT TO PROVIDE ASSISTANCE TO INDIGENT FAMILIES	6,75
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	FEEDING CHI F COACTEDAD MODILE CT	NONE	COV	LENABLE DECIDIENT TO BROVIDE	
ı	FEEDING GULF COAST5248 MOBILE ST	NONE	GOV	ENABLE RECIPIENT TO PROVIDE	, ه
	THEODORE, AL 36582			ASSISTANCE TO INDIGENT	I
	·			FAMILIES	I

form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
GOOD COUNCEL MARY' SHELTER GULF COAST 14001 BOROS RD ELBERTA, AL 36530	NONE	PC	ENABLE RECIPIENT TO PROVIDE ASSISTANCE TO INDIGENT FAMILIES	25,000	
BCBEGULF SHORES ELEMENTARY SCHOOL 1600 E 3RD ST GULF SHORES, AL 36542	NONE	GOV	ENABLE RECIPIENT TO FUND PROFESSIONAL DEVELOPMENT PROGRAM	15,000	
CARE HOUSEP O BOX 874 BAY MINETTE, AL 36507	NONE	PC	ENABLE RECIPIENT TO PROVIDE ASSISTANCE AND SERVICES TO	30,000	

SCHOOL 1600 E 3RD ST GULF SHORES, AL 36542	NONE	GOV	PROFESSIONAL DEVELOPMENT PROGRAM	15,
CARE HOUSED O BOY 974	NONE	DC.	ENABLE DECIDIENT TO DROVIDE	20

BAY MINETTE, AL 36507 ASSISTANCE AND SERVICES TO INDIGENT FAMILIES	CARE HOUSEP O BOX 874 BAY MINETTE, AL 36507	NONE	PC	ENABLE RECIPIENT TO PROVIDE ASSISTANCE AND SERVICES TO INDIGENT FAMILIES	30,
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orm 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
ELBERTA FIRE DEPARTMENT 13120 ILLINOIS ST ELBERTA, AL 36530	NONE	PC	ENABLE RECIPIENT TO PURCHASE NEW TOOLS AND EQUIPMENT	29,727	
CHRISTIAN SERVICE CENTER P O BOX 882 GULF SHORES, AL 36547	NONE	PC	ENABLE RECIPIENTS TO PROVIDE ASSISTANCE TO INDIGENT FAMILIES	20,000	
EQUINE THERAPY GROUP FOUNDATION INC 37252 CHEVAL AIRE ROAD BAY MINETTE, AL 36507	NONE	NC	ENABLE RECIPIENT TO EXPAND THE AVAILABILITY OF EQUINE ASSISTED THERAPY FOR SUBSIDIZED AND NO-COST COUNSELING TO THOSE IN	5,000	

EQUINE THERAPY GROUP FOUNDATION	NONE	NC	ENABLE RECIPIENT TO EXPAND	
INC			THE AVAILABILITY OF EQUINE	
37252 CHEVAL AIRE ROAD			ASSISTED THERAPY FOR	
BAY MINETTE, AL 36507			SUBSIDIZED AND NO-COST	
			COUNSELING TO THOSE IN	
			NEED	

3a

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
JENSEN'S HEART OF GOLD 6093 ANDHURST DRIVE GULF SHORES, AL 36542	NONE	PC	ENABLE RECIPIENT TO PROVIDE ASSISTANCE TO INDIGENT FAMILIES	1,500
MAGNOLIA SPRINGS PUBLIC LIBRARY 12440 MAGNOLIA AVENUE SUITE 600 MAGNOLIA SPRINGS, AL 36555	NONE	PC	ENABLE RECIPIENT TO PURCHASE OF BOOKS,E-BOOKS AND OTHER LIBRARY MATERIALS	500
MIRACLE LEAGUE OF COASTAL ALABAMA P O BOX 70776 TUSCALOOSA, AL 35407	NONE	PC	ENABLE RECIPIENT TO BUILD BASEBALL FIELDS AND PALYGROUND FOR SPECIAL NEEDS COMMUNITY	100,000

MAGNOLIA SPRINGS, AL 36555			AND OTHER LIBRARY MATERIALS	
MIRACLE LEAGUE OF COASTAL ALABAMA P O BOX 70776 TUSCALOOSA, AL 35407	NONE	PC	ENABLE RECIPIENT TO BUILD BASEBALL FIELDS AND PALYGROUND FOR SPECIAL NEEDS COMMUNITY	100,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)		recipient		
a Paid during the year				
MUSCULAR DISTROPHY ASSOCIATION 2800 VETERANS BLVD329 METAIRIE, LA 70002	NONE	PC	ENABLE RECIPIENT TO FUND RESEARCH AND PROVIDE SERVICES TO PATIENTS WITH MUSCULAR DYSTROPHY	5,000
PRODISEE PANTRYP O BOX 7403 SPANISH FORT, AL 36577	NONE	PC	ENABLE RECIPIENT TO PROVIDE ASSISTANCE TO INDIGENT FAMILIES	30,000
ROBERTSDALE ELEMENTARY BAND 19150 WILTERS ST ROBERTSDALE, AL 36567	NONE	GOV	ENABLE RECIPIENT TO PURCHASE BAND EQUIPMEMT	3,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)		recipient		
a Paid during the year				
ROBERTSDALE ELEMENTARY MUSIC 19150 WILTERS ST ROBERTSDALE, AL 36567	NONE	GOV	ENABLE RECIPIENT TO PURCHASE MUSIC EQUIPMENT	2,889
SNOOK CHRISTIAN ACADEMY 18930 COUNTY ROAD 28 FOLEY, AL 36535	NONE	NC	ENABLE RECIPIENT TO PROVIDE EDUCATION TO CHILDREN FROM PRE-K THROUGH 12TH GRADE AND MAINTAIN THE SCHOOL FACILITY	525,000
SOUTH BALDWIN EDUCATION	NONE	DC.	ENABLE BECIDIENT TO FUND	170,000

18930 COUNTY ROAD 28 FOLEY, AL 36535			EDUCATION TO CHILDREN FROM PRE-K THROUGH 12TH GRADE AND MAINTAIN THE SCHOOL FACILITY	·
SOUTH BALDWIN EDUCATION FOUNDATION P O BOX 1600	NONE	PC	ENABLE RECIPIENT TO FUND SCHOLARSHIPS AND ADMINISTRATIVE EXPENSES	170,000

FOLEY, AL 36536 ASSISTANCE

1,366,695

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Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
SOUTH BALDWIN LITERACY COUNCIL 21441 HIGHWAY 98 EAST FOLEY, AL 36535	NONE	PC	ENABLE RECIPIENT TO FUND THE LEARN TO EARN PROGRAM FOR ADULTS	10,000
THE EXCEPTIONAL FOUNDATION P O BOX 1267 FAIRHOPE, AL 36533	NONE	PC	ENABLE RECIPIENT TO PROVIDE ASSISTANCE AND SUPPORT TO THOSE WITH SPECIAL NEEDS AND THEIR FAMILIES	8,000
THE LEE FOUNDATION 27365 POLLARD ROAD DAPHNE, AL 36526	NONE	PC	ENABLE RECIPIENT TO PROVIDE ASSISTANCE TO INDIGENT FAMILIES	50,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of contribution recipient		Amount
Name and address (home or business)				
a Paid during the year				
THE LIGHTHOUSEP O BOX 531 ROBERTSDALE, AL 36567	NONE	PC	ENABLE RECIPIENT TO FUND THE COURT ADVOCACY PROGRAM	10,000
THE SHOULDER OF THE CENTRAL GULF COAST P O BOX 7130	NONE	PC	ENABLE RECIPIENT TO PROVIDE SUBSTANCE ABUSE TREATMENT SERVICES	10,000

P O BOX 7130 SPANISH FORT, AL 36577	NONE	PC	SUBSTANCE ABUSE TREATMENT SERVICES	10,000
UNDER HIS WINGS INCP O BOX 91 ROBERTSDALE, AL 36567	NONE	NC	ENABLE RECIPIENT TO PROVIDE ASSISTANCE AND EDUCATIONAL	25,000

SPANISH FORT, AL 36577			SERVICES	
UNDER HIS WINGS INCP O BOX 91 ROBERTSDALE, AL 36567	NONE	NC	ENABLE RECIPIENT TO PROVIDE ASSISTANCE AND EDUCATIONAL	25,00

SITHUSITI OKT, TIE 30377				
UNDER HIS WINGS INCP O BOX 91 ROBERTSDALE, AL 36567	NONE	NC	ENABLE RECIPIENT TO PROVIDE ASSISTANCE AND EDUCATIONAL SUPPORT TO INDIGENT GIRLS	25,

UNDER HIS WINGS INCP O BOX 91 ROBERTSDALE, AL 36567	NONE	NC	ENABLE RECIPIENT TO PROVIDE ASSISTANCE AND EDUCATIONAL SUPPORT TO INDIGENT GIRLS	25,0
--	------	----	--	------

ROBERTSDALE, AL 36567		ASSISTANCE AND EDUCATIONAL SUPPORT TO INDIGENT GIRLS	, 

		SUPPORT TO INDIGENT GIRLS	
Total		•	1 366 605

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
UNITED WAY OF BALDWIN COUNTY 700 NORTH MCKENZIE ST FOLEY, AL 36535	NONE	PC	ENABLE RECIPIENT TO PROVIDE ASSISTANCE TO INDIGENT FAMILIES	7,500
USA MITCHELL CANCER INSTITUTE 2325 N MCKENZIE ST	NONE	PC	ENABLE RECIPIENT TO PROVIDE SUPPORT TO INDIGENT	50,000

2325 N MCKENZIE ST FOLEY, AL 36535	NONE	PC	SUPPORT TO INDIGENT FAMILIES	50,000
WATERFRONT RESCUE MISSION 2325 N MCKENZIE ST FOLEY, AL 36535	NONE	PC	ENABLE RECIPIENT TO PROVIDE SUPPORT TO INDIGENT FAMILIES	7,500

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Form 990PF Part XV Line 3 - Gran	ts and Contributions Paid	During the	Year or Approved for Future	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
ROBERTSDALE ELEMENTARY SCHOOL PTO 19150 WILTERS ST ROBERTSDALE, AL 36567	NONE	GOV	ENABLE RECIPIENT TO PURCHASE REWARDS AND PROVED FOOD TO INDIGENT STUDENTS	5,000
BCBE SILVERHILL ELEMENTARY SCHOOL 15800 4TH AVE SILVERHILL, AL 36576	NONE	GOV	ENABLE RECIPIENT TO PURCHASE SCHOOL EQUIPMENT	10,000
ST MICHAEL CATHOLIC SCHOOL FOOTBALL 11732 HIGBEE RD	NONE	PC	ENABLE RECIPIENT TO PURCHASE ATHLETIC UNIFORMS AND EQUIPMENT	10,000

FAIRHOPE, AL 36532

Total . . 1,366,695

form 990PF Part XV Line 3 - Gran	ts and Contributions Paid	During the	Year or Approved for Future	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
ST PATRICK CATHOLIC SCHOOL 23070 STATE HWY 59 S ROBERTSDALE, AL 36567	NONE	PC	ENABLE RECIPIENT TO PROVIDE EDUCATION TO CHILDREN FROM KINDERGARTEN THROUGH 8TH GRADE AND MAINTAIN THE SCHOOL	15,000
BCBESUMMERDALE SCHOOL 400 E BROADWAY SUMMERDALE, AL 36580	NONE	GOV	ENABLE RECIPIENT TO FUND SAFETY PROGRAM AND PURCHASE SAFETY EQUIPMENT	41,440
ANGEL FLIGHT SOARS 2000 AIRPORT RD SUITE 227 ATLANTA, GA 30341	NONE	PC	ENABLE RECIPIENT TO FUND AIR TRANSPORTATION FOR PEOPLE TO RECEIVE MEDICAL	1,950

TREATMENT

1,366,695 За

efile GRAPHIC print - DO NOT PR	ROCESS As Filed	l Data -	D	LN: 93491319042558	
TY 2017 Accounting Fees Schedule					
	Name: SNOOH	( FOUNDATION			
	<b>EIN:</b> 23-7250795				
Accounting Fees Schedule					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	

14,757

49,190

ACCOUNTING FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491319042558
TY 2017 All Other Program Re	lated Invest	ments Schedule	
	aa		
Name:	SNOOK FOUND	DATION	
EIN:	23-7250795		
	Category		Amount
N/A			0

# TY 2017 Depreciation Schedule

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Name: SNOOK FOUNDATION

ETN. 32 735070

		EIN: 2	3-7250795						
Description of Property	Date Acquired	Cost or Other Basıs	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
RANGE AND REFRIGERATOR	2011-03-08	2,122	1,869	200DB	7 000000000000	169	0		
LEXMARK X5463DE COPIER	2011-07-29	1,412	1,412	200DB	5 000000000000	0	0		
YUPON FARM LAND	2001-01-01	4,905,698		L		0	0		
MPC300 RICOH COPIER	2012-09-06	3,886	3,612	200DB	5 000000000000	274	0		
LANDSCAPING	2012-12-13	25,182	8,867	150DB	15 000000000000	1,632	0		
IRRIGATION SYSTEM	2012-11-08	25,090	8,835	150DB	15 000000000000	1,626	0		
AIR COMPRESSOR	2014-03-05	1,448	407	200DB	7 000000000000	91	0		
APPLE COMPUTER	2015-04-23	5,694	1,566	200DB	5 000000000000	512	0		
TABLE AND CHAIRS	2015-10-22	8,313	1,293	200DB	7 000000000000	818	0		

DLN: 93491319042558

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319042558
TY 2017 Investments - Other S	Schedule	
Name: S	SNOOK FOUNDAT	TION

EIN: 23-7230/93				
Investments Other Schedule 2				
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value	
TRUST COMPANY OF AMERICA (MATSON	AT COST	18,729,625	25,794,564	

22 7250705

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319042558
TY 2017 Land, Etc.		

# Schedule

Name: SNOOK FOUNDATION

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
RANGE AND REFRIGERATOR	2,122	2,038	84	
LEXMARK X5463DE COPIER	1,412	1,412	0	
YUPON FARM LAND	4,905,698	0	4,905,698	
MPC300 RICOH COPIER	3,886	3,886	0	
LANDSCAPING	25,182	10,499	14,683	
IRRIGATION SYSTEM	25,090	10,461	14,629	
AIR COMPRESSOR	1,448	1,222	226	
APPLE COMPUTER	5,694	4,925	769	
TABLE AND CHAIRS	8,313	6,268	2,045	

efile GRAPHIC print - DO NOT PROCES	S As Filed Data	-	DL	N: 93491319042558
TY 2017 Legal Fees Schedu	le			_
	ne: SNOOK FOU N: 23-7250795			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	23,415	11,707		11,707

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319042558

### TY 2017 Other Assets Schedule

Name: SNOOK FOUNDATION

**EIN:** 23-7250795

Other Assets Schedule				
Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value	
OTHER RECEIVABLE	227	227	227	
CONSTRUCTION IN PROCESS-ANTIQUE CAR MUSEUM	239,620	239,620	239,620	
CONSTRUCTION IN PROCESS-TELEPHONE MUSEUM	3,151,290	3,154,201	3,154,201	
RESTORED ANTIQUE AUTOMOBILES	573,877	573,877	573,877	
THE REFUGEE PROPERTY	0	400,000	400,000	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491319042558	
TY 2017 Other Expenses Schedule					
Name:	SNOOK FOUNDATION				
EIN:	23-7250795				
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
INSURANCE	22,835	13,099		9,736	

4,572

6,179

14,307

1,907

5,600

53,292

689

693

4,027

0

0

0

0

0

0

0

0

954

4,572

6,179

14,307

953

5,600

53,292

689

693

4,027

REPAIRS AND MAINTENANCE

TELEPHONE

**JANITORIAL** 

SECURITY

DUMPSTER

OFFICE EXPENSE

MISCELLANEOUS

GROUNDS MAINTENACE

UTILITIES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319042558			
TY 2017 Other Increases Schedule					
Name	SNOOK FOUNDATION				
Maille.	SNOOK TOONDATION				
EIN:	23-7250795				
De	escription	Amount			
CONTRIBUTION RECOVERED		400,000			

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLI	N: 93491319042558	
TY 2017 Other Professional Fees Schedule					
Name: SNOOK FOUNDATION					
EIN: 23-7250795					
LIN. 23-7230793					
Category	Amount	Net Investment	Adjusted Net	Disbursements for Charitable	

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES - MATRIX	135,378	135,378		0

20,300

20,300

OTHER PROFESSIONAL FEES

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DL	N: 93491319042558		
TY 2017 Taxes Schedule						
Name: SNOOK FOUNDATION EIN: 23-7250795						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
PAYROLL	19,378	0		19,378		
FOREIGN	12,272	12,272		0		
PROPERTY	396	0		396		
FEDERAL INCOME TAX	8,119	8,119		0		