DLN: 93491309004048

OMB No 1545-0052

2017

## **Return of Private Foundation**

Department of the Treasury Internal Revenue Service

Form 990-PF

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

Do not enter social security numbers on this form as it may be made public.
 Information about Form 990-PF and its instructions is at <a href="www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

Open to Public Inspection

For	caler	ndar year 2017, or tax year	beginning 01-01-20	)17 , ar	nd ending 12-31-	2017				
		Indation			A Employer ıd	entification numbe	r			
SC	MA FOL	JNDATION INC			46-3994466					
	ber and D BOX 5	l street (or P O box number if mail is no 346	ot delivered to street address)	Room/suite	<b>B</b> Telephone nu	mber (see instruction	ns)			
		, state or province, country, and ZIP or GA 31906	foreign postal code		<b>C</b> If exemption	application is pending	g, check here			
G Cł	neck al	l that apply □ Initial return □ Final return ☑ Address chang	Amended return	former public charity	<b>2</b> Foreign or test, chec	D 1. Foreign organizations, check here  2 Foreign organizations meeting the 85% test, check here and attach computation				
		pe of organization $oldsymbol{oldsymbol{arphi}}$ Section 5 14947(a)(1) nonexempt charitable	501(c)(3) exempt private	foundation e private foundation		undation status was t n 507(b)(1)(A), chec				
Fai of	r mark year <i>(f</i>	xet value of all assets at end from Part II, col (c), \$ 187,201,394	J Accounting method  Other (specify)  (Part I, column (d) must	☐ Cash ☑ Accru		ation is in a 60-month n 507(b)(1)(B), chec				
Pa	rt I	Analysis of Revenue and of amounts in columns (b), (c), and (equal the amounts in column (a) (see	d) may not necessarily	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)			
	1	Contributions, gifts, grants, etc , schedule)	received (attach	25,351,417	,					
	2	Check ► ☐ If the foundation is r	not required to attach							
Reverue	3	Interest on savings and temporar	ry cash investments	212,777	212,777	212,777				
	4	Dividends and interest from secu	rities	3,060,501	3,060,501	3,060,501				
	5a	Gross rents								
	ь	Net rental income or (loss)								
	6a	Net gain or (loss) from sale of as	sets not on line 10	6,900,670						
	b	Gross sales price for all assets or	n lin <b>e 6a</b> 29,347,557							
$\aleph$ e	7	Capital gain net income (from Pa			6,900,670					
	8	Net short-term capital gain				839,429				
	9	Income modifications								
	10a	Gross sales less returns and allow	vances							
	b	Less Cost of goods sold	<u> </u>							
	С	Gross profit or (loss) (attach sche	edule)							
	11	Other income (attach schedule)		-181,480	-181,480					
	12	Total. Add lines 1 through 11		35,343,885	9,992,468	4,112,707				
	13	Compensation of officers, directo	rs, trustees, etc							
	14	Other employee salaries and wag	jes	95,574						
Š	15	Pension plans, employee benefits								
1156	16a	Legal fees (attach schedule) .		12,804	12,804					
<u>6</u>	ь	Accounting fees (attach schedule	)	29,085	29,085					
and Administrative Expenses	С	Other professional fees (attach so	chedule)							
tive	17	Interest		134,834	134,834					
traj	18	Taxes (attach schedule) (see inst	tructions)	273,668	<u> </u>					
II S	19	Depreciation (attach schedule) ar	,	4,438						
Ξ	20	Occupancy	·							
Ą	21	Travel, conferences, and meeting		6,507	,					
n L	22	Printing and publications		.,						
g G	23	Other expenses (attach schedule		1,603,673	1,532,361					
Operating	24	Total operating and administr	•		, , , , , , ,					
ē		Add lines 13 through 23	<u>-</u>	2,160,583	1,807,763		0			
o	25	Contributions, gifts, grants paid		7,181,060			7,181,060			
	26	Total expenses and disbursen	nents. Add lines 24 and							
	27	Subtract line 26 from line 12		9,341,643	1,807,763		7,181,060			
	27 a	Excess of revenue over expendisbursements	ses and	26,002,242						
	ь	Net investment income (if neg	ative, enter -0-)		8,184,705					
	c	Adjusted net income(if negative	·		-,,, 33	4,112,707				
		work Deduction Act Notice see	,		<u> </u>	1 ,===,:=,	000 PE (22)			

	2	Savings and temporary cash investments	772,377	263,84	18 263,848
	3	Accounts receivable			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less allowance for doubtful accounts ▶			
۸	8	Inventories for sale or use			
sets	9	Prepaid expenses and deferred charges	10,594		
As	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	22,550,609	28,461,5	28,461,524
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	119,818,766	<b>9</b> 158,467,6	78 158,467,678
	14	Land, buildings, and equipment basis ►			
		Less accumulated depreciation (attach schedule) ▶ 7,142	12,782	<b>%</b> 8,3	8,344
	15	Other assets (describe			1

<b>⊄</b>  10a	Investments—U.S. and state government obligations (attach schedule)				
b	Investments—corporate stock (attach schedule)	22,550,609	<b>%</b>	28,461,524	28,461,524
C	Investments—corporate bonds (attach schedule)				
11	Investments—land, buildings, and equipment basis ▶				
	Less accumulated depreciation (attach schedule) ▶				
12	Investments—mortgage loans				
13	Investments—other (attach schedule)	119,818,766	ارچ•	158,467,678	158,467,678
14	Land, buildings, and equipment basis ►				
	Less accumulated depreciation (attach schedule) ▶ 7,142	12,782	اروه	8,344	8,344
15	Other assets (describe >)				
16	Total assets (to be completed by all filers—see the				
	ınstructions Also, see page 1, item I)	143,165,128		187,201,394	187,201,394
17	Accounts payable and accrued expenses				
18	Grants payable				
20 21 21	Deferred revenue				
를 20	Loans from officers, directors, trustees, and other disqualified persons				
[ 21	Mortgages and other notes payable (attach schedule)				
<b>-</b>   22	Other liabilities (describe		<b>%</b> ∫	79,054	
23	Total liabilities(add lines 17 through 22)			79,054	
Ses	Foundations that follow SFAS 117, check here  and complete lines 24 through 26 and lines 30 and 31.				

	15	Other assets (describe)			
	16	Total assets (to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	143,165,128	187,201,394	187,201,394
	17	Accounts payable and accrued expenses			
Liabilities	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe )		79,054	
	23	Total liabilities(add lines 17 through 22)		79,054	
		Foundations that follow SFAS 117, check here			
ses		and complete lines 24 through 26 and lines 30 and 31.			
Balance	24	Unrestricted	143,165,128	187,122,340	
Bal	25	Temporarily restricted			
Fund	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here 🕨 🗌			
oľ		and complete lines 27 through 31.			
Assets	27	Capital stock, trust principal, or current funds			
356	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
ו כל	I				

Balances		Foundations that follow SFAS 117, check here		
ç		and complete lines 24 through 26 and lines 30 and 31.		
<u>=</u>	24	Unrestricted	143,165,128	187,122,340
ž	25	Temporarily restricted		
	26	Permanently restricted		
		Foundations that do not follow SFAS 117, check here ▶ □ and complete lines 27 through 31.		
)	27 28 29 30	Capital stock, trust principal, or current funds		
\$ S E	28	Paid-in or capital surplus, or land, bldg , and equipment fund		
<u>ت</u>	29	Retained earnings, accumulated income, endowment, or other funds		
Ž	30	Total net assets or fund balances (see instructions)	143,165,128	187,122,340

143,165,128

187,201,394

143,165,128

26,002,242

17,955,495

187,122,865

187,122,340 Form **990-PF** (2017)

525

1

2

3

4

5

6

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

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

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

**Analysis of Changes in Net Assets or Fund Balances** 

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

Other increases not included in line 2 (itemize)

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a

Add lines 1, 2, and 3 . . . . .

31

Part III

2

3

4

5

Page **3** 

Capital Gaills	and Losses for Tax on Theese	illelit Illcolle					
	<b>(a)</b> the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		(b) How acquired P—Purchase D—Donation		(c) te acquired o , day, yr )	(d) Date sold (mo , day, yr )	
1aSee Addıtıonal Data Tabl	e						
b							
С							
d				1			
e				+			
	(f)		(g)	1		h)	
<b>(e)</b> Gross sales price	Depreciation allowed (or allowable)	Cost or	other basis ense of sale		Gain or (loss) (e) plus (f) minus (g)		
a See Additional Data Tabl	e						
b							
c							
d							
e							
Complete only for assets	s showing gain in column (h) and ow	ned by the foundation	on 12/31/69			I)	
	(j)	<u> </u>	(k)	1		h) gain minus	
<b>(i)</b> F M V as of 12/31/69	Advicted basis	Excess	of col(ı) (j), ıf any	со	l (k), but not	less than -0-) <b>or</b> om col (h))	
a See Additional Data Tabl	e						
b							
С							
d							
e							
	1	If gain, also enter in P	art I line 7	+			
2 Capital gain net income	e or (net capital loss)	If (loss), enter -0- in F		2		6,900,670	
3 Net short-term capital	gain or (loss) as defined in sections :	1222(5) and (6)					
If gain, also enter in Pa	art I, line 8, column (c) (see instructi	ons) If (loss), enter -0	)- I				
ın Part I, lıne 8			}	3		839,429	
			,				
Part V Qualification	Under Section 4940(e) for Re	educed Tax on Net	Investment Ir	icome	<u>;                                    </u>		
(For optional use by domestic p	private foundations subject to the sec	ction 4940(a) tax on ne	et investment incor	me)			
If section 4940(d)(2) applies, l	eave this part blank				_	_	
Was the foundation liable for th	ne section 4942 tax on the distributa	ble amount of any year	in the base period	12	∐ Y₁	es 🗹 No	
If "Yes," the foundation does n	ot qualify under section 4940(e) Do	not complete this part					
<ol> <li>Enter the appropriate ar</li> </ol>	nount ın each column for each year,	see instructions before	making any entri	es			
(a)	(b)	(c)			(b)		
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitab	le-use assets	(col	Distribution rati (b) divided by c		
2016	6,037,000		135,007,819	(00)	(B) divided by e	0 04472	
2015	5,451,749		122,535,489			0 04449	
2014	5,592,000		110,934,114			0 05041	
2013	3,332,000		110,551,111			0 030 11	
2012							
2 Total of line 1, column (	d)		2			0 139615	
'	o for the 5-year base period—divide			+		0 139013	
	ndation has been in existence if less		, or by the			0 046538	
	encharitable-use assets for 2017 fron		4			159,658,541	
<b>5</b> Multiply line 4 by line 3			5			7,430,189	
• • •	ent income (1% of Part I, line 27b)		6			81,847	
			7	1		7,512,036	
	ions from Part XII, line 4 ,		8	+		7,181,060	
	eater than line 7, check the box in Pa			ng a 1º	% tax rate Se		
instructions	eater and mile /, effect the box fill re	and var, mile aby, and con	.p. see that part us	u	tax rate De	C THE FULL VI	

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

OHI	1111 550-F1 (2017)										
		Information About C	Officers, Directors, Trust	ees Foundation Ma	nagers Highly Paid Fm	nlovees					
Pa	rt VIII	and Contractors	meers, Directors, Trast	ecs, roundation ric	magers, mgm <b>y</b> raid En	тртоуссэ,					
1	List all o	fficers, directors, trustee	es, foundation managers ar	d their compensation	(see instructions).						
			· · · · · · · · · · · · · · · · · · ·		(4)						

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
DANIEL P AMOS	President	0		
PO BOX 5566 COLUMBUS, GA 31906	0 00			
2 Compensation of five highest-pa	id employees (other than t	hose included on line 1	.—see instructions). If no	ne, enter "NONE."
(a) Name and address of each employee pa	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
NONE				
Total number of other employees paid ov  3 Five highest-paid independent co	·			Eil
(a) Name and address of each person	•	· · · · · · · · · · · · · · · · · · ·	e of service	(c) Compensation
NONE				
		-		
		-		
Fotal number of others receiving over \$50  Part IX-A Summary of Direct 0		<u> </u>		
List the foundation's four largest direct charitable		ude relevant statistical inform	nation such as the number of	
organizations and other beneficiaries served, con	ferences convened, research paper	rs produced, etc		Expenses
1				
2				
3				
*				
Part IX-B Summary of Program	m-Related Investments	(see instructions)		
Describe the two largest program-related inve	estments made by the foundation o	during the tax year on lines 1	and 2	Amount
1				
2				
All other program-related investments	See instructions			
3				
Total. Add lines 1 through 3 .				
				Form <b>990-PF</b> (2017

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

1b

2

3a 3h

4

5

7.181.060

7,181,060

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

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

495.677

7.323,556

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(d)

Page 9

_		 	٠,	_	_	_
ì	X		I		l	

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Part XIII	Undistributed Income (see instruc	tions)					

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

a Enter amount for 2016 only. . . . . . Excess distributions carryover, if any, to 2017 a From 2012. . . . .

(a)

Corpus

(b)

Years prior to 2016

(c)

2016

6,685,383

6,685,383

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

d From 2015. . . . .

e From 2016. . . . . 4 Qualifying distributions for 2017 from Part

f Total of lines 3a through e. . . . . . . . XII, line 4 ▶ \$ 7,181,060

**d** Applied to 2017 distributable amount. . . . e Remaining amount distributed out of corpus **5** Excess distributions carryover applied to 2017 (If an amount appears in column (d), the

6 Enter the net total of each column as

7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . . . . . . 8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2018.

10 Analysis of line 9

a Excess from 2013. . . **b** Excess from 2014. . c Excess from 2015. . . . d Excess from 2016. . . e Excess from 2017. . .

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

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 . . . . .

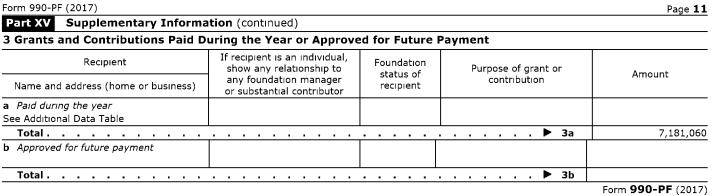
indicated below:

(Election required—see instructions). . . . .

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

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

same amount must be shown in column (a) )



Enter gross amounts unless otherwise indicated		Unrelated bu	siness 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	<b>(d)</b> Amount	function income (See instructions )
		-				
		+		+		
<b>g</b> Fees	and contracts from government agencies					
3 Intere	est on savings and temporary cash tments			14	212,777	
	nds and interest from securities			14	3,060,501	
	ntal income or (loss) from real estate	-				
	-financed property lebt-financed property	+				
	ental income or (loss) from personal property	+		1		
	nvestment income				181,480	
	or (loss) from sales of assets other than	+		<del>                                     </del>	101,400	
inven	tory					6,900,670
	come or (loss) from special events					
	profit or (loss) from sales of inventory					
	revenue <b>a</b>					
		+		1		
d						
е						
2 Subtot						
	al Add columns (b), (d), and (e)				3,091,798	
3 Total.	Add line 12, columns (b), (d), and (e)			13	3,091,798	
3 Total. (See w		lations )				
3 Total. (See w Part XV	Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations ) e Accomplish income is reporte	ment of Exemed in column (e) of	pt Purposes of Part XVI-A contribut	ed importantly to	
3 Total. (See w Part XV Line No.	Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is reporte	ment of Exemed in column (e) of	pt Purposes of Part XVI-A contribut	ed importantly to	
3 Total. (See w Part XV Line No.	Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is reporte	ment of Exemed in column (e) of	pt Purposes of Part XVI-A contribut	ed importantly to	
3 Total. (See w Part XV Line No.	Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is reporte	ment of Exemed in column (e) of	pt Purposes of Part XVI-A contribut	ed importantly to	
3 Total. (See w Part XV Line No.	Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is reporte	ment of Exemed in column (e) of	pt Purposes of Part XVI-A contribut	ed importantly to	
3 Total. (See w Part XV Line No.	Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is reporte	ment of Exemed in column (e) of	pt Purposes of Part XVI-A contribut	ed importantly to	
3 Total. (See w Part XV Line No.	Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is reporte	ment of Exemed in column (e) of	pt Purposes of Part XVI-A contribut	ed importantly to	
3 Total. (See w Part XV Line No.	Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is reporte	ment of Exemed in column (e) of	pt Purposes of Part XVI-A contribut	ed importantly to	
3 Total. (See w Part XV Line No.	Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is reporte	ment of Exemed in column (e) of	pt Purposes of Part XVI-A contribut	ed importantly to	
3 Total. (See w Part XV Line No.	Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is reporte	ment of Exemed in column (e) of	pt Purposes of Part XVI-A contribut	ed importantly to	
3 Total. (See w Part XV Line No.	Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is reporte	ment of Exemed in column (e) of	pt Purposes of Part XVI-A contribut	ed importantly to	
3 Total. (See w Part XV Line No.	Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is reporte	ment of Exemed in column (e) of	pt Purposes of Part XVI-A contribut	ed importantly to	
3 Total. (See w Part XV Line No.	Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is reporte	ment of Exemed in column (e) of	pt Purposes of Part XVI-A contribut	ed importantly to	
3 Total. (See w Part XV Line No.	Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is reporte	ment of Exemed in column (e) of	pt Purposes of Part XVI-A contribut	ed importantly to	
3 Total. (See w Part XV Line No.	Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is reporte	ment of Exemed in column (e) of	pt Purposes of Part XVI-A contribut	ed importantly to	
3 Total. (See w Part XV Line No.	Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is reporte	ment of Exemed in column (e) of	pt Purposes of Part XVI-A contribut	ed importantly to	
3 Total. (See w Part XV Line No.	Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is reporte	ment of Exemed in column (e) of	pt Purposes of Part XVI-A contribut	ed importantly to	
3 Total. (See w Part XV Line No.	Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is reporte	ment of Exemed in column (e) of	pt Purposes of Part XVI-A contribut	ed importantly to	
3 Total. (See w Part XV Line No.	Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is reporte	ment of Exemed in column (e) of	pt Purposes of Part XVI-A contribut	ed importantly to	
3 Total. (See w Part XV Line No.	Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is reporte	ment of Exemed in column (e) of	pt Purposes of Part XVI-A contribut	ed importantly to	
3 Total. (See w Part XV Line No.	Add line 12, columns (b), (d), and (e)orksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is reporte	ment of Exemed in column (e) of	pt Purposes of Part XVI-A contribut	ed importantly to	6,900,670 9,992,468

orm 9	90-PF (	2017)										Pa	ge <b>13</b>
Pari	XVII	Information Re Exempt Organi		ansfer	s To a	nd Transact	ions and R	Relatio	nships With No	ncharit	able		
		ganization directly or in Code (other than sectio	directly enga							on 501		Yes	No
a Tra	nsfers t	from the reporting foun	dation to a ne	oncharita	able exer	mpt organizati	on of						
(1	) Cash.										1a(1)		No
(2	) Other	assets									1a(2)		No
<b>b</b> Oth	ner tran	sactions											
(1	) Sales	of assets to a nonchar	ıtable exempt	organiz	ation.						1b(1)		No
(2	) Purch	ases of assets from a r	noncharitable	exempt	organiza	ition					1b(2)		No
		al of facilities, equipmen	•								1b(3)		No
		bursement arrangemen						• •		•	1b(4)		No
		or loan guarantees.								•	1b(5)		No
•		mance of services or m	•		-					•	1b(6)		No
	-	facilities, equipment, neer to any of the above								•   	1c		No
	any tran	ds, other assets, or sernsaction or sharing arra  (b) Amount involved	ngement, sho	ow in col	umn (d)		he goods, otl	her asset		ved		ngemen	ıts
. ,			(1,			, 3	(=, = = =		,	,			
des	cribed	ndation directly or indire in section 501(c) of the omplete the following s (a) Name of organizatio	Code (other		ction 501		ection 527? .	-			Yes	✓	No
	T		<del>-</del> 1 1 11 1			1.1							
Sign	of m	er penalties of perjury, ly knowledge and belief h preparer has any kno	, it is true, co							ased on	all infor	matio	n of
Here	-	****				2018-11-04	<b>)</b> -	****		return	ne IRS di ne prepai		
	'	Signature of officer or t	rustee		[	Date	' Tı	tle		(see ır	nstr )? 🛭	✓ Yes	□ <sub>No</sub>
		Print/Type preparer's	name	Prepare	er's Signa	ture	Date			PTIN			
		, , , , , , , , , , , , , , , , , , ,			gill	<del>.</del>	Date		Check if self-		D00244	200	
Paid		TAMARA L CALLIER	₹						employed ▶ □		P00246	i∠ <del>y</del> ŏ	
	arer Only		_IER-WITT CP	AS LLP						Fırm's E	IN ▶58	-22669	952

Firm's address ► 7290 NORTH LAKE DR SUITE 503

COLUMBUS, GA 31909

Phone no (706) 321-9111

Form **990-PF** (2017)

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation SOMA FOUNDATION INVESTMENTS LLC Р 2017-01-01 2017-12-31 SOMA FOUNDATION INVESTMENTS LLC Ρ 2016-01-01 2017-12-31 SOMA FOUNDATION INVESTMENTS LLC Р 2016-01-01 2017-12-31 68798 AFLAC INC Р 2017-06-14 2017-06-16 66782 AFLAC INC Р 2017-08-14 2017-08-07 Ρ 45500 AFLAC INC 2017-12-05 2017-12-06 Ρ 14687 VARIOUS 2017-08-08 2017-08-24 Р 2017-09-25 87484 AFLAC INC 2016-04-28 7855 AFLAC INC Ρ 2013-12-30 2017-06-16 3218 AFLAC INC Р 2015-03-24 2017-08-07 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 624,986 624,986 4,385,256 4,385,256 113,808 113,808 5,348,608 5,051,634 296,974 5,366,905 5,394,556 -27,651 4,006,836 4,007,321 -485 1,331,832 1,386,227 -54,395 7,300,010 5,865,448 1,434,562 610,703 526,233 84,470 258,613 215,468 43,145 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 624,986 4,385,256 113,808 296,974 -27,651 -485 -54,395 1,434,562 84,470 43,145

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

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

a Paid during the year				
FOCUS ON TRUTH1252 CEDAR AVENUE COLUMBUS, GA 31906	NONE	NC	FINANCIAL ASSISTANCE	33,000
CANDLER SCHOOL OF THEOLOGY -	NONE	NC	FINANCIAL SUPPORT	500,000

EMORY 201 DOWMAN DRIVE ATLANTA, GA 30307				
ST PAUL UMC2101 WILDWOOD AVE	NONE	NC	FINANCIAL SUPPORT	

ATLANTA, GA 30307				1
ST PAUL UMC2101 WILDWOOD AVE COLUMBUS, GA 31906	NONE	NC	FINANCIAL SUPPORT	100

'				
ST PAUL UMC2101 WILDWOOD AVE COLUMBUS, GA 31906	NONE	NC	FINANCIAL SUPPORT	100,000
Total				7,181,060

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, 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 RANSOMED HEART MINISTRIES NONE NC FINANCIAL SUPPORT 25.000 PO BOX 51065

COLORADO SPRINGS, CO 80949				
ASIAN ACCESSPO BOX 200 SAN DIMAS, CA 91773	NONE	NC	FINANCIAL SUPPORT	1,000,000
VALLEY RESCUE MISSIONPO BOX 1232	NONE	NC	FINANCIAL SUPPORT	105,000

SAN DIMAS, CA 91773				
VALLEY RESCUE MISSIONPO BOX 1232 COLUMBUS, GA 31902	NONE	NC	FINANCIAL SUPPORT	105,00
Total				7,181,060

За

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

NAOMI'S VILLAGEPO BOX 793841 NONE NC FINANCIAL ASSISTANCE	a Paid during the year				
DALLAS, TX 75379	NAOMI'S VILLAGEPO BOX 793841 DALLAS, TX 75379	NONE	NC	FINANCIAL ASSISTANCE	

GOOD SAMARITAN HEALTH 1015 DOLAD LEE HOLLOWELL PKWY NW ATLANTA, GA 30318	NONE	NC	FINANCIAL SUPPORT	

ATLANTA, GA 30318				
OPEN DOOR COMMUNITY HOUSE 2405 2ND AVE	NONE	NC	FINANCIAL SUPPORT	

3a

OPEN DOOR COMMUNITY HOUSE	NONE	NC	FINANCIAL SUPPORT	75,000
2405 2ND AVE				
COLUMBUS, GA 31901				

206,600

35,000

2405 2ND AVE COLUMBUS, GA 31901		, , , , , ,
Total	 	 7,181,060

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, 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 ST LUKE UNITED METHODIST NONE NC FINANCIAL SUPPORT 112,500 PO BOX 867

COLUMBUS, GA 31906				
SAMARITAN'S PURSEPO BOX 3000 BOONE, NC 28607	NONE	NC	FINANCIAL SUPPORT	1,170,000
DUKE UNIVERSITY2138 CAMPUS DRIVE DURHAM, NC 27708	NONE	NC	FINANCIAL SUPPORT	150,000

Total . 3a 7,181,060

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

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

a Paid during the year				
CHILDSPRING INTERNATIONAL 1328 PEACHTREE STREET NE ATLANTA GA 30309	NONE	NC	FINANCIAL SUPPORT	50,000

ATLANTA, GA 30309				
MACEDONIA MINISTRYPO BOX 40 HANOVER, PA 17331	NONE	NC	FINANCIAL SUPPORT	

MACEDONIA MINISTRYPO BOX 40 HANOVER, PA 17331	NONE	NC	FINANCIAL SUPPORT	
SALVATION ARMY	NONE	NC	FINANCIAL SUPPORT	

,				1
SALVATION ARMY 5201 WARM SPRINGS ROAD COLUMBUS. GA 31290	IONE	NC	FINANCIAL SUPPORT	30,000

SALVATION ARMY	NONE	INC	FINANCIAL SUPPORT	30,000
5201 WARM SPRINGS ROAD COLUMBUS, GA 31290				·

50,000

COLUMBUS, GA 31290		
Total	· · · · · · · · · · · · · · · · · · ·	7,181,060

eezer 1200, ert 51230		1
Total	 	 7,181,060

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

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

a Paid during the year				
ASBURY THEOLOGICAL SEMINARY 204 N LEXINGTON AVE WILMORE, KY 40390	NONE	NC	FINANCIAL SUPPORT	400,000

•				
MERCY MED3702 2ND AVE COLUMBUS, GA 31904	NONE	NC	FINANCIAL SUPPORT	
LINIVERSITY OF CHMBERLANDS	NONE	NC	FINANCIAL SUPPORT	

3a

COLOMBO3, GA 31304				
UNIVERSITY OF CUMBERLANDS 6191 COLLEGE STATION DRIVE WILLIAMSBURG. KY 40769	NONE	NC	FINANCIAL SUPPORT	150,000

100,000

			_	
WILLIAMSBURG, KY 40769				
6191 COLLEGE STATION DRIVE				
UNIVERSITY OF CUMBERLANDS	NONE	NC	FINANCIAL SUPPORT	150,000

WILLIAMSBURG, KY 40769		
Total	 	 7,181,060

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year TRUTH SPRING ACADEMY3408 5TH AVE NONE NC FINANCIAL SUPPORT 45,000 COLUMBUS.GA 31904

SER FAMILIA INC209 NORTHRIDGE DR ACWORTH, GA 30101	NONE	NC	FINANCIAL SUPPORT	50,000
METHODIST HOME FOR CHILDREN 304 PIERCE AVENUE MACON, GA 31204	NONE	NC	FINANCIAL SUPPORT	470,000

Total . 3a 7,181,060

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year GREATFUL HEARTS MINISTRIES NONE NC FINANCIAL SUPPORT 10,000 1266 WEST PACES FERRY RD NW STE 430 ATLANTA, GA 30327

GLOBAL MINISTRIES UMC 458 PONCE DE LEON AVE NE ATLANTA, GA 30308	NONE	NC	FINANCIAL SUPPORT	300,000
SOUTH GA CONFERENCE UMC 520 PROFESSIONAL DRIVE SUITE 1 MACON, GA 31208	NONE	NC	FINANCIAL SUPPORT	1,000,000

За

7,181,060

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

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

a Paid during the year				
FELLOWSHIP OF CHRISTIAN ATHLETES 8701 LEEDS ROAD KANSAS CITY, MO 64129	NONE	NC	FINANCIAL SUPPORT	5,000
INTERNATIONAL FRIENDS MINISTRY	NONE	NC	FINANCIAL SUPPORT	50,000

01115/15 C111,110 01125				
NTERNATIONAL FRIENDS MINISTRY 8404 UNIVERSITY AVE COLUMBUS, GA 31907	NONE	NC	FINANCIAL SUPPORT	

3404 UNIVERSITY AVE COLUMBUS, GA 31907				
YOUNG LIFE1137 LOCKWOOD AVE	NONE	NC	FINANCIAL SUPPORT	340,000

YOUNG LIFE1137 LOCKWOOD AVE COLUMBUS, GA 31906	NONE	NC	FINANCIAL SUPPORT	340,000
				<u> </u>

YOUNG LIFE1137 LOCKWOOD AVE COLUMBUS, GA 31906	NONE	NC	FINANCIAL SUPPORT	340,00
Total			•	7 181 060

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

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

a Paid during the year				
DAVAR PARTNERS INTERNATIONAL 1015 TYRONE ROAD	NONE	NC	FINANCIAL SUPPORT	40,000

TYRONE, GA 30290				
SAFEHOUSE MINISTRIES 2101 HAMILTON ROAD COLUMBUS, GA 31904	NONE	NC	FINANCIAL SUPPORT	

SAFEHOUSE MINISTRIES 2101 HAMILTON ROAD COLUMBUS, GA 31904	NONE	NC	FINANCIAL SUPPORT	200,000
TEEN CHALLENGE15 W 10TH STREET	NONE	NC	FINANCIAL SUPPORT	100,000

COLUMBUS, GA 31904				
TEEN CHALLENGE15 W 10TH STREET COLUMBUS, GA 31901	NONE	NC	FINANCIAL SUPPORT	100,000

TEEN CHALLENGE15 W 10TH STREET COLUMBUS, GA 31901	NONE	NC	FINANCIAL SUPPORT	100,000
Total				7,181,060

COLUMBUS, GA 31901	 		-
Total	 		7,181,06

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 AGAPE YOUTH FAMILY CENTER NONE NC FINANCIAL SUPPORT 10,000

2210 MARIETTA BLVD NW ATLANTA, GA 30318				,
THE HOUSE OF TIME	NONE	NC	FINANCIAL SUPPORT	35,000

1200 WYNNTON ROAD COLUMBUS, GA 31906	None		THE WELL SOLL OICH	
VALLEY INTERFAITH PROMISE	NONE	NC	FINANCIAL SUPPORT	

COLONBOS, GA 51300				
VALLEY INTERFAITH PROMISE	NONE	NC	FINANCIAL SUPPORT	25,000
PO BOX 1141				
COLUMBUS.GA 31902				

<b>-</b>				7 101 000
PO BOX 1141 COLUMBUS, GA 31902				
VALLEY INTERFALTH PROMISE	NONE	NC	FINANCIAL SUPPORT	25,000

COLUMBUS, GA 31902			
Total		<b>.</b>	7 181 060

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

a Paid during the year				
HAGGAI INSTITUTE 4725 PEACHTREE CORNERS CIRCLE	NONE	NC	FINANCIAL SUPPORT	12,000
NODCROSS CA 20003				

NORCROSS, GA 30092				
HOUSE OF HEROES4709 MILGEN ROAD COLUMBUS, GA 31907	NONE	NC	FINANCIAL SUPPORT	20,000
				1

COLUMBUS, GA 31907				,
MARANNOOK INC 10425 VETERANS MEMORIAL PKWY	NONE	NC	FINANCIAL SUPPORT	10,000

MARANNOOK INC	NONE	NC	FINANCIAL SUPPORT	10,000
10425 VETERANS MEMORIAL PKWY LA FAYETTE, AL 36862				
LA PATETTE, AL 30002				

Total		7.181.060
10425 VETERANS MEMORIAL PKWY		

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year GOOD SAMARITAN HEALTH NONE NC FINANCIAL SUPPORT 50,000 1015 DOLAD LEE HOLLOWELL PKWY NW ATLANTA, GA 30318 CHRISTIAN UNION NONE NC FINANCIAL SUPPORT 51,800

19 VANDEVENTER AVE PRINCETON, NJ 08542				
UNION CONGREGATIONAL CHURCH 176 COOPER AVENUE	NONE	NC	FINANCIAL SUPPORT	25,000

UNION CONGREGATIONAL CHURCH 176 COOPER AVENUE	NONE	NC	FINANCIAL SUPPORT	2
MONTCLAIR, NJ 07043				

За

Total				7,181,060
176 COOPER AVENUE MONTCLAIR, NJ 07043				,
UNION CONGREGATIONAL CHURCH	INONE	INC	I FINANCIAL SUPPORT	1 25,00

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 contribution show any relationship to status of any foundation manager recipient Name and address (home or business)

a Paid during the year				
PASTORAL INSTITUTE 2022 15TH AVENUE	NONE	NC	FINANCIAL SUPPORT	40,160

or substantial contributor

COLUMBUS, GA 31901	!		
Total		 	7,181,060

efile GRAPHIC print - DO NOT I	PROCESS	As Filed D	ata -		ı	DLN: 93491309004048
TY 2017 Accounting F	ees Sch	edule		,		
	Name:	SOMA FO	DUNDA	ATION INC		
<b>EIN:</b> 46-3994466						
Softv	<b>Software ID:</b> 17005038					
Software '	Version:	2017v2.2	2			
Accounting Fees Schedule						
Category	Am	ount		Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CALLIER WITT		29,085		29,085	(	0 0

## TY 2017 Depreciation Schedule

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

Name: SOMA FOUNDATION INC

ETN: 46 2004466

	<b>EIN:</b> 46-3994466								
	<b>Software ID:</b> 17005038								
	Software Version: 2017v2.2								
Description of Property	Date Acquired	Cost or Other Basis	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
OFFICE FURNITURE	2016-07-06	5,290	1,058	200DB	32 00 %	1,693			
SIGNAGE	2016-07-19	734	147	200DB	32 00 %	235			
OFFICE FURNITURE	2016-07-19	2,569	514	200DB	32 00 %	822		1	
COMPUTER EQUIPMENT	2016-08-03	5,352	765	200DB	24 49 %	1,311			
TELEPHONE EQUIPMENT	2016-08-03	1,541	220	200DB	24 49 %	377		1	

DLN: 93491309004048

effile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491309004048
TY 2017 Investments Corpora	ate Stock Schedule	
Name:	SOMA FOUNDATION INC	
EIN:	46-3994466	
Software ID:	17005038	
Software Version:	2017v2.2	

DI N. 02404200004040

<b>Software Version:</b> 2017v2.2		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
AFLAC, INC. COMMON STOCK	28,461,524	28,461,524

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DL	N: 93491309004048
TY 2017 Investments - Other	Schedule		
Name:	SOMA FOUNDATION INC		
EIN:	46-3994466		
Software ID:	17005038		
Software Version:	2017v2.2		
nvestments Other Schedule 2			
Category/ Item	Listed at Cost or	Book Value	End of Year Fair

Investments Other Schedule 2						
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value			
SOMA FOUNDATION INVESTMENTS	FMV	158,467,678	158,467,678			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491309004048
TY 2017 Land, Etc. Schedule		
Name:	SOMA FOUNDATION INC	
EIN:	46-3994466	
Software ID:	17005038	

Software Version: 2017v2.2					
Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value	
Furniture and Fixtures	8,593	4,469	4,124	4,124	
Machinery and Equipment	6.893	2.673	4.220	4,220	

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLN	N: 93491309004048
TY 2017 Legal Fees Sched	ule			_
Naı	me: SOMA FOUN	DATION INC		
<b>EIN:</b> 46-3994466				
<b>Software ID:</b> 17005038				
Software Versi	ion: 2017v2.2			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	12,804	12,804	0	0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491309004048
TY 2017 Other Decreases Scho	edule		
Name:	SOMA FOUND	ATION INC	
EIN:	46-3994466		
Software ID:	17005038		
Software Version:	2017v2.2		
De	escription		Amount
MEALS & ENTERTAINMENT 1/2			331
PENALTIES			20
TEMP DIFFS - SOMA			174

efile GRAPHIC print - DO NOT PROCESS   As Filed Data - DLN: 93						
TY 2017 Other Expenses Schedule						
Name:	SOMA FOUNDA	TION INC				
EIN:	46-3994466					
Software ID:	17005038					
Software Version:	2017v2.2					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
BANK CHARGES	198	198				
CHARITABLE CONTRIBUTIONS - SOMA INVESTME	658	658				
COMPUTER EXPENSE	6,357					
CONSULTING FEES	31,139					
DUES & SUBSCRIPTIONS	4,796					
GROUP INSURANCE	430					
INSURANCE	5,778					
INVESTMENT FEES	8,688	8,688				

1,200

332

1,200

MANAGEMENT FEES

MEALS & ENTERTAINMENT 1/2

Description Revenue and **Net Investment Adjusted Net** Disbursements for Expenses per Income Income Charitable Books Purposes OFFICE EXPENSE 9,991 OTHER - SOMA INVESTMENTS 415,162 415,162 PORTFOLIO - SOMA INVESTMENTS 572,559 572,559 PORTFOLIO OTHER - SOMA INVESTMENTS 207 207

105

11,743

14,756

518,933

298

343

14,756

518,933

Other Expenses Schedule

POSTAGE EXPENSE

ROYALTY EXPENSE - SOMA INVESTMENTS

SEC 59(E)(2) - SOMA INVESTMENTS

RENT

SECURITY

TELEPHONE

TY 2017 Other Income Schedule						
Name:	SOMA FOUN	NDATION INC				
EIN:	46-3994466	5				
Software ID:	17005038					
Software Version:	2017v2.2					
Other Income Schedule						
Description		Revenue And	Net Investment	Adjusted Net Income		

**Expenses Per Books** 

-181,480

Income

-181,480

DLN: 93491309004048

Other Investment Income

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491309004048				
TY 2017 Other Increases Schedule						
Name:	SOMA FOUNDATIO	N INC				
EIN:	46-3994466					
Software ID:	17005038					
Software Version:	2017v2.2					
De	escription	Amount				
PERM DIFFS - SOMA		848				
UNREALIZED GAIN		17,954,647				

efile GRAPHIC print - DO NOT PROCE	ESS As Filed Data	- ]	DL	N: 93491309004048		
TY 2017 Taxes Schedule						
Na	me: SOMA FOUN	DATION INC				
į	<b>EIN:</b> 46-3994466	)				
Software	<b>ID:</b> 17005038					
Software Version: 2017v2.2						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
FED EXCISE TAX	163,694					
FOREIGN TAX - SOMA	98,679	98,679				
GENERAL	30					
PAYROLL TAXES	11,265					

efile GRAPHIC print - D	O NOT PROCESS	As Filed Data -				DLN: 93491309004048
Schedule B		Schedu	le of Contributo	rs		OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Information a	bout Schedule B (F	► Attach to Form 990, 990-EZ, or 990-PF t Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>			2017
Name of the organization SOMA FOUNDATION INC	on				Employer id	dentification number
Organization type (che	sk one)				46-3994466	
Organization type (one	ok one)					
Filers of:	Section:					
Form 990 or 990-EZ						
	☐ 4947(a)( <sup>2</sup>	I) nonexempt char	itable trust <b>not</b> treated as	s a private founda	ition	
	☐ 527 politi	cal organization				
Form 990-PF	<b>✓</b> 501(c)(3)	exempt private fo	undation			
	☐ 4947(a)( <sup>2</sup>	4947(a)(1) nonexempt charitable trust treated as a private foundation				
			PF that received, during t omplete Parts I and II So			
Special Rules						
under sections 5 received from an	09(a)(1) and 170(b)	(1)(A)(vı), that che uring the year, tota	g Form 990 or 990-EZ that cked Schedule A (Form s al contributions of the gre plete Parts I and II	990 or 990-EZ), P	art II, line 13,	, 16a, or 16b, and that
during the year, t	total contributions of	more than \$1,000	or (10) filing Form 990 o exclusively for religious animals Complete Parts	, charitable, scien		
during the year, of If this box is check purpose Don't co	contributions <i>exclus</i> cked, enter here the omplete any of the p	ively for religious, total contributions parts unless the <b>G</b> o	or (10) filing Form 990 c charitable, etc., purposes that were received durin eneral Rule applies to th or more during the year.	s, but no such cor ng the year for an is organization be	ntributions tota exclusively re ecause it rece	aled more than \$1,000 eligious, charitable, etc , elived <i>nonexclusively</i>
990-EZ, or 990-PF), but	ıt <b>must</b> answer "No	on Part IV, line 2	le and/or the Special Rul , of its Form 990, or chec t it doesn't meet the filing	ck the box on line	H of its	
For Paperwork Reduction A for Form 990, 990-EZ, or 990		ructions	Cat No 30613X	Sched	ule B (Form 990	0, 990-EZ, or 990-PF) (2017)

Name of organization Employer identification number SOMA FOUNDATION INC 46-3994466 Part I Contributors (See instructions) Use duplicate copies of Part I if additional space is needed (a) (d) (b) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person DANIEL P AMOS **Payroll** PO BOX 5566 \$ 23,144,210 Noncash COLUMBUS, GA 31906 (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person JEAN AMOS Payroll PO BOX 5566 \$1,091,812 Noncash COLUMBUS, GA 31906 (Complete Part II for noncash contributions) (b) (a) (c) (d) No. Total contributions Type of contribution Name, address, and ZIP + 4 Person THE PAUL JEAN AMOS CLAT **Payroll** PO BOX 5566 \$ 1,115,395 Noncash COLUMBUS, GA31906 (Complete Part II for noncash contributions) (a) (b) (c) (d) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (c) (d) (a) (b) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person **Payroll** \$ Noncash (Complete Part II for noncash contributions)

Schedule B (Forr	n 990, 990-EZ, or 990-PF) (2017)		Page <b>3</b>	
Name of organiz		Employer identification number		
SOMA FOUNDATION INC		46-3	994466	
Part II	Noncash Property (See Instructions) Use duplicate copies of Part II if additional Space is needed			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
1	281,067 SHARES OF AFLAC STOCK	\$ 23 144,210		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
2	13,488 SHARES OF AFLAC STOCK	\$ 1 091,812		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		s		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		\$		
		Schedule B (Form	990, 990-EZ, or 990-PF) (2017)	

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)