

Form **990-PF**  
 Department of the Treasury  
 Internal Revenue Service

**Return of Private Foundation**  
**or Section 4947(a)(1) Trust Treated as Private Foundation**  
 ▶ Do not enter social security numbers on this form as it may be made public.  
 ▶ Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

OMB No 1545-0052  
**2017**  
**Open to Public Inspection**

**For calendar year 2017, or tax year beginning 01-01-2017, and ending 12-31-2017**

Name of foundation THE PINOLA CONSERVANCY		<b>A Employer identification number</b> 47-2938744
Number and street (or P O box number if mail is not delivered to street address) 410 KAY LANE	Room/suite	<b>B Telephone number</b> (see instructions) (318) 797-7900
City or town, state or province, country, and ZIP or foreign postal code SHREVEPORT, LA 71115		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
<b>I</b> Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 1,117,348	<b>J</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

<b>Part I Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc., received (attach schedule)	1,650,074			
	<b>2</b> Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B				
	<b>3</b> Interest on savings and temporary cash investments				
	<b>4</b> Dividends and interest from securities				
	<b>5a</b> Gross rents				
	<b>b</b> Net rental income or (loss)				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10				
	<b>b</b> Gross sales price for all assets on line 6a				
	<b>7</b> Capital gain net income (from Part IV, line 2)		0		
	<b>8</b> Net short-term capital gain			0	
	<b>9</b> Income modifications				
	<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less Cost of goods sold					
<b>c</b> Gross profit or (loss) (attach schedule)					
<b>11</b> Other income (attach schedule)	5,143	0	5,143		
<b>12 Total.</b> Add lines 1 through 11	1,655,217	0	5,143		
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc	0	0	0	0
	<b>14</b> Other employee salaries and wages	552,008	0	82,801	469,207
	<b>15</b> Pension plans, employee benefits				
	<b>16a</b> Legal fees (attach schedule)	75	0	11	64
	<b>b</b> Accounting fees (attach schedule)	15,000	0	2,250	12,750
	<b>c</b> Other professional fees (attach schedule)	90,268	0	13,541	76,727
	<b>17</b> Interest				
	<b>18</b> Taxes (attach schedule) (see instructions)				
	<b>19</b> Depreciation (attach schedule) and depletion	85,964	0	85,964	
	<b>20</b> Occupancy	115,982	0	17,397	98,585
	<b>21</b> Travel, conferences, and meetings				
	<b>22</b> Printing and publications				
	<b>23</b> Other expenses (attach schedule)	477,910	0	75,082	402,828
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	1,337,207	0	277,046	1,060,161
	<b>25</b> Contributions, gifts, grants paid	0			0
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	1,337,207	0	277,046	1,060,161	
<b>27</b> Subtract line 26 from line 12					
<b>a Excess of revenue over expenses and disbursements</b>	318,010				
<b>b Net investment income</b> (if negative, enter -0-)		0			
<b>c Adjusted net income</b> (if negative, enter -0-)			0		

<b>Part II Balance Sheets</b> Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	9,840	21,982	21,982
	<b>2</b> Savings and temporary cash investments . . . . .			
	<b>3</b> Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>4</b> Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____	1,141	0	0
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .			
	<b>10a</b> Investments—U S and state government obligations (attach schedule)			
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .			
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .			
	<b>11</b> Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	<b>12</b> Investments—mortgage loans . . . . .			
	<b>13</b> Investments—other (attach schedule) . . . . .			
	<b>14</b> Land, buildings, and equipment basis ▶ <u>1,258,423</u> Less accumulated depreciation (attach schedule) ▶ <u>163,057</u>	746,367	1,095,366	1,095,366
<b>15</b> Other assets (describe ▶ _____)				
<b>16 Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	757,348	1,117,348	1,117,348	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	66,107	40,642	
	<b>18</b> Grants payable . . . . .			
	<b>19</b> Deferred revenue . . . . .			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .			
	<b>22</b> Other liabilities (describe ▶ _____)	0	67,455	
	<b>23 Total liabilities</b> (add lines 17 through 22) . . . . .	66,107	108,097	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	<b>24</b> Unrestricted . . . . .			
	<b>25</b> Temporarily restricted . . . . .			
	<b>26</b> Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>			
	<b>27</b> Capital stock, trust principal, or current funds . . . . .	0	0	
	<b>28</b> Paid-in or capital surplus, or land, bldg, and equipment fund	0	0	
<b>29</b> Retained earnings, accumulated income, endowment, or other funds	691,241	1,009,251		
<b>30 Total net assets or fund balances</b> (see instructions) . . . . .	691,241	1,009,251		
<b>31 Total liabilities and net assets/fund balances</b> (see instructions) .	757,348	1,117,348		

<b>Part III Analysis of Changes in Net Assets or Fund Balances</b>		
<b>1</b> Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	<b>1</b>	691,241
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	318,010
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	0
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	1,009,251
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	0
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	<b>6</b>	1,009,251

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
<b>1a</b>			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	2	
{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No  
 If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

**1** Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2016	1,435,811	10,104	142 103226
2015	1,090,097	4,972	219 247184
2014			
2013			
2012			

<b>2</b> Total of line 1, column (d)	<b>2</b>	361 350410
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	180 675205
<b>4</b> Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	<b>4</b>	8,062
<b>5</b> Multiply line 4 by line 3	<b>5</b>	1,456,604
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	0
<b>7</b> Add lines 5 and 6	<b>7</b>	1,456,604
<b>8</b> Enter qualifying distributions from Part XII, line 4	<b>8</b>	1,413,647

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

Table with 11 rows for excise tax calculations. Includes sub-rows for credits and payments (6a-6d) and a 'Refunded' column for line 11.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes columns for 'Yes' and 'No' responses. Includes sub-rows for 1a, 1b, 1c, 4a, 4b, 8b, and 10.

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-14 regarding controlled entities, distribution to donor advised funds, public inspection requirements, and books in care.

Located at 410 KAY LANE SHREVEPORT LA ZIP+4 71115

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year.

Table with 3 columns: Question, Yes, No. Row 16 regarding interest in or authority over a bank, securities, or other financial account in a foreign country.

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

Main table with 3 columns: Question, Yes, No. Rows 1a-4b regarding Form 4720 exceptions and requirements.

**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

<b>5a</b>	During the year did the foundation pay or incur any amount to			
	<b>(1)</b> Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	<b>(2)</b> Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	<b>(3)</b> Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	<b>(4)</b> Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	<b>(5)</b> Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
<b>b</b>	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? . . . . . Organizations relying on a current notice regarding disaster assistance check here. . . . . ▶			<b>5b</b>
<b>c</b>	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . . . <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<b>6a</b>	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
<b>b</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . . <i>If "Yes" to 6b, file Form 8870</i>			<b>6b</b>
				<b>No</b>
<b>7a</b>	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
<b>b</b>	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? . . . . .			<b>7b</b>

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

**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(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	(e) Expense account, other allowances
See Additional Data Table				

**2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JACOB KRAEMER 410 KAY LANE SHREVEPORT, LA 71115	CARETAKER 40 00	79,200	0	0

**Total** number of other employees paid over \$50,000. . . . . **0**

**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
N E CRAGER BUILDER INC 8935 ADAMS ROAD KEITHVILLE, LA 71047	AZA CONSTRUCTION	227,570
KING ELECTRIC 9427 SAINT VINCENT AVENUE SHREVEPORT, LA 71106	AZA CONSTRUCTION	61,865

**Total** number of others receiving over \$50,000 for professional services. . . . . **0**

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc

	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments (see instructions)**

	Amount
<b>1</b> Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	
<b>2</b>	
All other program-related investments See instructions	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3	<b>0</b>

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	0
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	8,185
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	8,185
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	8,185
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	123
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	8,062
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	403

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	
<b>2a</b>	Tax on investment income for 2017 from Part VI, line 5.	<b>2a</b>	
<b>b</b>	Income tax for 2017 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	
<b>5</b>	Add lines 3 and 4.	<b>5</b>	
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	1,060,161
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	353,486
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	1,413,647
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	1,413,647

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
<b>1</b> Distributable amount for 2017 from Part XI, line 7				
<b>2</b> Undistributed income, if any, as of the end of 2017				
<b>a</b> Enter amount for 2016 only. . . . .				
<b>b</b> Total for prior years 20___, 20___, 20___				
<b>3</b> Excess distributions carryover, if any, to 2017				
<b>a</b> From 2012. . . . .				
<b>b</b> From 2013. . . . .				
<b>c</b> From 2014. . . . .				
<b>d</b> From 2015. . . . .				
<b>e</b> From 2016. . . . .				
<b>f</b> Total of lines 3a through e. . . . .				
<b>4</b> Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ _____				
<b>a</b> Applied to 2016, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .				
<b>d</b> Applied to 2017 distributable amount. . . . .				
<b>e</b> Remaining amount distributed out of corpus				
<b>5</b> Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a) )				
<b>6 Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5				
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .				
<b>c</b> 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. . . . .				
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .				
<b>e</b> Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .				
<b>f</b> Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018 . . . . .				
<b>7</b> 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). . . . .				
<b>8</b> Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions). . . . .				
<b>9 Excess distributions carryover to 2018.</b> Subtract lines 7 and 8 from line 6a . . . . .				
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2013. . . . .				
<b>b</b> Excess from 2014. . . . .				
<b>c</b> Excess from 2015. . . . .				
<b>d</b> Excess from 2016. . . . .				
<b>e</b> Excess from 2017. . . . .				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling. . . . . 2016-05-26

**b** Check box to indicate whether the organization is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

	Tax year				(e) Total
	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .	0	0	0	0	0
<b>b</b> 85% of line 2a . . . . .	0	0	0	0	0
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .	1,413,647	1,435,811	1,090,097	0	3,939,555
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .	0	0	0	0	0
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c . . . . .	1,413,647	1,435,811	1,090,097	0	3,939,555
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .			283,920		283,920
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i) . . . . .			279,612		279,612
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					0
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					0
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					0
<b>(3)</b> Largest amount of support from an exempt organization . . . . .					0
<b>(4)</b> Gross investment income . . . . .					0

**Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)**

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

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**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed

---

**b** The form in which applications should be submitted and information and materials they should include

---

**c** Any submission deadlines

---

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
<b>Total . . . . .</b> ▶ <b>3a</b>				0
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b> ▶ <b>3b</b>				0





**Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation**

<b>(a) Name and address</b>	<b>Title, and average hours per week (b) devoted to position</b>	<b>(c) Compensation (If not paid, enter -0-)</b>	<b>(d) Contributions to employee benefit plans and deferred compensation</b>	<b>Expense account, (e) other allowances</b>
PAUL M DICKSON P O BOX 51367 SHREVEPORT, LA 71135	PRESIDENT/TREASURER 10 00	0	0	0
BEVERLY R DICKSON P O BOX 51367 SHREVEPORT, LA 71135	VICE PRESIDENT 2 00	0	0	0
JACOB A DICKSON P O BOX 51367 SHREVEPORT, LA 71135	SECRETARY 2 00	0	0	0
PAUL M DICKSON JR P O BOX 51367 SHREVEPORT, LA 71135	DIRECTOR 2 00	0	0	0
RUSSELL R DICKSON P O BOX 51367 SHREVEPORT, LA 71135	DIRECTOR 2 00	0	0	0

**TY 2017 Accounting Fees Schedule****Name:** THE PINOLA CONSERVANCY**EIN:** 47-2938744**Accounting Fees Schedule**

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ACCOUNTING	15,000	0	2,250	12,750

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## TY 2017 Depreciation Schedule

Name: THE PINOLA CONSERVANCY

EIN: 47-2938744

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
BIRD (KURT LANDIG)	2015-02-24	525	138	SL	7 000000000000	75	0	75	
BIRD (SCOTT OBRIEN)	2015-02-24	622	163	SL	7 000000000000	89	0	89	
BIRD 1 1 MAGPIE ROBIN (DUY VU)	2015-04-17	1,600	381	SL	7 000000000000	229	0	229	
5 5 PACIFIC EIDER, 1 2 WHITE WINGED SCOTER (PETER CURRO)	2015-04-21	7,400	1,762	SL	7 000000000000	1,057	0	1,057	
BIRD RUBY THROAT (CHOI HUNG WONG)	2015-04-22	800	190	SL	7 000000000000	114	0	114	
BIRD (THE FEATHERED WAGON)	2015-04-27	12,950	3,083	SL	7 000000000000	1,850	0	1,850	
BIRD FEMALE MAGPIE ROBIN (HAO NGUYEN)	2015-05-26	650	147	SL	7 000000000000	93	0	93	
BIRD (LUDGER BREMEHR)	2015-06-03	11,382	2,575	SL	7 000000000000	1,626	0	1,626	
BIRD (LUDGER BREMEHR)	2015-07-20	17,612	3,564	SL	7 000000000000	2,516	0	2,516	
BIRD (AVIAN PACIFIC)	2015-08-10	660	133	SL	7 000000000000	94	0	94	
BIRD (LUDGER BREMEHR)	2015-08-18	12,468	2,375	SL	7 000000000000	1,781	0	1,781	
BIRD (LUDGER BREMEHR)	2015-11-17	4,257	659	SL	7 000000000000	608	0	608	
BIRD (MALCOLM DAVIS)	2015-12-10	4,650	719	SL	7 000000000000	664	0	664	
BIRD (THE FEATHERED WAGON)	2015-12-29	6,153	879	SL	7 000000000000	879	0	879	
BIRD (AVIAN PACIFIC)	2015-12-30	4,255	608	SL	7 000000000000	608	0	608	
BIRD	2015-04-14	3,587	896	SL	7 000000000000	512	0	512	
BIRD	2015-06-12	3,270	740	SL	7 000000000000	467	0	467	
BIRD	2015-08-14	1,020	207	SL	7 000000000000	146	0	146	
BIRD	2015-11-16	3,810	589	SL	7 000000000000	544	0	544	
BIRD	2015-12-14	575	89	SL	7 000000000000	82	0	82	

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
AVIARY LANDSCAPE-FIELDSTONE, BOULDERS,ROCK, GRASS	2015-02-24	117,130	14,316	SL	15 000000000000	7,809	0	7,809	
AVIARY LANDSCAPE-WIRE ON CEILINGS, INTERIOR WALLS, ROCK WALLS	2015-02-24	48,484	5,926	SL	15 000000000000	3,232	0	3,232	
AVIARY LANDSCAPE-GUNITE POOLS AND EQUIPMENT	2015-02-24	77,874	9,518	SL	15 000000000000	5,192	0	5,192	
PLANTS FOR BIRD AVIARY	2015-02-24	27,239	3,329	SL	15 000000000000	1,816	0	1,816	
PLANTS FOR GUEST HOUSE	2015-02-24	5,066	619	SL	15 000000000000	338	0	338	
HOT MIX OVERLAY BIRD AVIARY AND GUEST HOUSE AND CHANNEL DRAINS	2015-02-24	54,145	6,618	SL	15 000000000000	3,610	0	3,610	
8 CAST IRON GRATE	2015-02-24	1,439	176	SL	15 000000000000	96	0	96	
AVIARY -POOL	2015-06-09	40,318	4,256	SL	15 000000000000	2,688	0	2,688	
GLASS FOR POOL IN AVIARY	2015-06-09	2,862	302	SL	15 000000000000	191	0	191	
AVIARY IRRIGATION	2015-06-09	10,634	1,123	SL	15 000000000000	709	0	709	
AVAIRY LANDSCAPE	2015-06-09	18,630	1,967	SL	15 000000000000	1,242	0	1,242	
AVIARY LANDSCAPE - BERMUDA SOD	2015-06-19	4,569	457	SL	15 000000000000	305	0	305	
AVIARY LANDSCAPE PONDS	2015-07-02	36,724	3,672	SL	15 000000000000	2,448	0	2,448	
AVIARY LANDSCAPE	2015-08-03	9,166	866	SL	15 000000000000	611	0	611	
AVIARY LANDSCAPE IRRIGATION	2015-08-21	15,029	1,336	SL	15 000000000000	1,002	0	1,002	
AVIARY CAGE IMPROVEMENTS	2015-10-20	2,444	190	SL	15 000000000000	163	0	163	
AVAIRY IRRIGATION	2015-11-04	13,588	1,057	SL	15 000000000000	906	0	906	
AVIARY LANDSCAPE	2015-06-19	14,682	1,468	SL	15 000000000000	979	0	979	
HABITAT CREATION AND IMPROVEMENTS	2016-12-31	225,191		SL	15 000000000000	15,013	0	15,013	
IMPROVEMENTS - AZA	2017-12-31	353,486		SL	15 000000000000	15,013	0	15,013	

<b>Description of Property</b>	<b>Date Acquired</b>	<b>Cost or Other Basis</b>	<b>Prior Years' Depreciation</b>	<b>Computation Method</b>	<b>Rate / Life (# of years)</b>	<b>Current Year's Depreciation Expense</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Cost of Goods Sold Not Included</b>
2015 HAYBUSTER 107C-101505897C	2017-03-22	26,003		SL	7 00000000000000	2,786	0	2,786	
JOHN DEER TRACTOR	2017-02-08	40,000		SL	7 00000000000000	5,238	0	5,238	
JOHN DEERE - RHINO CUTTER	2017-02-08	2,500		SL	7 00000000000000	327	0	327	
2016 HONDA SXS10M3G	2017-12-13	12,974		SL	5 00000000000000	216	0	216	

## TY 2017 Land, Etc. Schedule

**Name:** THE PINOLA CONSERVANCY

**EIN:** 47-2938744

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
BIRD (KURT LANDIG)	525	213	312	312
BIRD (SCOTT OBRIEN)	622	252	370	370
BIRD 1.1 MAGPIE ROBIN (DUY VU)	1,600	610	990	990
5.5 PACIFIC EIDER, 1.2 WHITE WINGED SCOTER (PETER CURRO)	7,400	2,819	4,581	4,581
BIRD RUBY THROAT (CHOI HUNG WONG)	800	304	496	496
BIRD (THE FEATHERED WAGON)	12,950	4,933	8,017	8,017
BIRD FEMALE MAGPIE ROBIN (HAO NGUYEN)	650	240	410	410
BIRD (LUDGER BREMEHR)	11,382	4,201	7,181	7,181
BIRD (LUDGER BREMEHR)	17,612	6,080	11,532	11,532
BIRD (AVIAN PACIFIC)	660	227	433	433
BIRD (LUDGER BREMEHR)	12,468	4,156	8,312	8,312
BIRD (LUDGER BREMEHR)	4,257	1,267	2,990	2,990
BIRD (MALCOLM DAVIS)	4,650	1,383	3,267	3,267
BIRD (THE FEATHERED WAGON)	6,153	1,758	4,395	4,395
BIRD (AVIAN PACIFIC)	4,255	1,216	3,039	3,039
BIRD	3,587	1,408	2,179	2,179
BIRD	3,270	1,207	2,063	2,063
BIRD	1,020	353	667	667
BIRD	3,810	1,133	2,677	2,677
BIRD	575	171	404	404
AVIARY LANDSCAPE- FIELDSTONE, BOULDERS, ROCK, GRASS	117,130	22,125	95,005	95,005
AVIARY LANDSCAPE- WIRE ON CEILINGS, INTERIOR WALLS, ROCK WALLS	48,484	9,158	39,326	39,326
AVIARY LANDSCAPE- GUNITE POOLS AND EQUIPMENT	77,874	14,710	63,164	63,164
PLANTS FOR BIRD AVIARY	27,239	5,145	22,094	22,094
PLANTS FOR GUEST HOUSE	5,066	957	4,109	4,109
HOT MIX OVERLAY BIRD AVIARY AND GUEST HOUSE AND CHANNEL DRAINS	54,145	10,228	43,917	43,917
8 CAST IRON GRATE	1,439	272	1,167	1,167
AVIARY -POOL	40,318	6,944	33,374	33,374
GLASS FOR POOL IN AVIARY	2,862	493	2,369	2,369
AVIARY IRRIGATION	10,634	1,832	8,802	8,802

<b>Category / Item</b>	<b>Cost / Other Basis</b>	<b>Accumulated Depreciation</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
AVAIRY LANDSCAPE	18,630	3,209	15,421	15,421
AVIARY LANDSCAPE - BERMUDA SOD	4,569	762	3,807	3,807
AVIARY LANDSCAPE PONDS	36,724	6,120	30,604	30,604
AVIARY LANDSCAPE	9,166	1,477	7,689	7,689
AVIARY LANDSCAPE IRRIGATION	15,029	2,338	12,691	12,691
AVIARY CAGE IMPROVEMENTS	2,444	353	2,091	2,091
AVAIRY IRRIGATION	13,588	1,963	11,625	11,625
AVIARY LANDSCAPE	14,682	2,447	12,235	12,235
HABITAT CREATION AND IMPROVEMENTS	225,191	15,013	210,178	210,178
IMPROVEMENTS - AZA	353,486	15,013	338,473	338,473
2015 HAYBUSTER 107C-101505897C	26,003	2,786	23,217	23,217
JOHN DEER TRACTOR	40,000	5,238	34,762	34,762
JOHN DEERE - RHINO CUTTER	2,500	327	2,173	2,173
2016 HONDA SXS10M3G	12,974	216	12,758	12,758

**TY 2017 Legal Fees Schedule****Name:** THE PINOLA CONSERVANCY**EIN:** 47-2938744

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
LEGAL	75	0	11	64

**TY 2017 Other Expenses Schedule****Name:** THE PINOLA CONSERVANCY**EIN:** 47-2938744**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK FEES	25	0	25	0
SUBSCRIPTIONS AND DUES	1,475	0	1,475	0
INSURANCE	1,997	0	300	1,697
MEALS & ENTERTAINMENT	2,006	0	301	1,704
LICENSE	2,494	0	2,494	0
COMMUNICATIONS EXPENSE	5,215	0	782	4,433
OFFICE SUPPLIES	12,001	0	1,800	10,201
FREIGHT AND SHIPPING	13,433	0	2,015	11,418
FUEL	20,923	0	3,139	17,785
FERTILIZER, SEEDS, PLANTS	26,073	0	3,911	22,162

**Other Expenses Schedule**

<b>Description</b>	<b>Revenue and Expenses per Books</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
EDUCATIONAL OUTREACH	44,630	0	6,694	37,935
BIRD EXPENSES	56,138	0	8,421	47,718
ANIMAL FEED	114,241	0	17,136	97,105
REPAIRS AND MAINTENANCE	148,582	0	22,287	126,294
HABITAT CREATION EXPENSE	28,677	0	4,302	24,376

**TY 2017 Other Income Schedule****Name:** THE PINOLA CONSERVANCY**EIN:** 47-2938744**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
SALE OF BIRDS TO ZOOS	5,143		5,143

**TY 2017 Other Liabilities Schedule****Name:** THE PINOLA CONSERVANCY**EIN:** 47-2938744

<b>Description</b>	<b>Beginning of Year - Book Value</b>	<b>End of Year - Book Value</b>
CONSTRUCTION PAYABLE	0	60,832
PAYROLL LIABILITIES	0	6,623

**TY 2017 Other Professional Fees Schedule****Name:** THE PINOLA CONSERVANCY**EIN:** 47-2938744

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
CUSTOM HIRE	1,384	0	208	1,176
VETERINARY	88,884	0	13,333	75,551

**TY 2017 Substantial Contributors  
Schedule****Name:** THE PINOLA CONSERVANCY**EIN:** 47-2938744**Name****Address**

PAUL DICKSON

410 KAY LANE  
SHREVEPORT, LA 71115

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)  
Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**  
▶ Attach to Form 990, 990-EZ, or 990-PF  
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at  
[www.irs.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047  
**2017**

**Name of the organization**  
THE PINOLA CONSERVANCY

**Employer identification number**  
47-2938744

**Organization type** (check one)

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup> 3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . ▶ \$ \_\_\_\_\_

**Caution.** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

<b>Name of organization</b> THE PINOLA CONSERVANCY	<b>Employer identification number</b> 47-2938744
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**Part I** **Contributors** (See instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PAUL DICKSON <hr/> 410 KAY LANE <hr/> SHREVEPORT, LA71115	\$ 1,650,074	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
	<hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
	<hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
	<hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
	<hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
	<hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
	<hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
	<hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )

<b>Name of organization</b> THE PINOLA CONSERVANCY	<b>Employer identification number</b> 47-2938744
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<b>Part II</b> <b>Noncash Property</b> (See instructions) Use duplicate copies of Part II if additional space is needed
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(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____

<b>Name of organization</b> THE PINOLA CONSERVANCY	<b>Employer identification number</b> 47-2938744
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**Part III** *Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ \_\_\_\_\_  
 Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____