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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*.**

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 WEST END HOME FOUNDATION

A Employer identification number
62-0516508

Number and street (or P O box number if mail is not delivered to street address)
109 KENNER AVE SUITE 202

Room/suite

B Telephone number (see instructions)
(615) 383-1395

City or town, state or province, country, and ZIP or foreign postal code
NASHVILLE, TN 37205

C If exemption application is pending, check here ▶ ☐

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here ▶ ☐
2 Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

H Check type of organization ☑ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ ☐

I Fair market value of all assets at end of year *(from Part II, col (c), line 16)* ▶$ 44,710,862

J Accounting method ☑ Cash ☐ Accrual ☐ Other (specify) _____
(Part I, column (d) must be on cash basis)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐

Part I **Analysis of Revenue and Expenses** *(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)
Revenue	1	Contributions, gifts, grants, etc , received (attach schedule)	63,318			
	2	Check ▶ ☐ if the foundation is **not** required to attach Sch B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	829,777	829,777	829,777	
	5a	Gross rents				
	b	Net rental income or (loss) _____				
	6a	Net gain or (loss) from sale of assets not on line 10	783,903			
	b	Gross sales price for all assets on line 6a 2,807,846				
	7	Capital gain net income (from Part IV, line 2)		783,783		
	8	Net short-term capital gain			266,859	
	9	Income modifications			10,000	
	10a	Gross sales less returns and allowances				
	b	Less Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)	43,085	30,263	43,085	
	12	**Total.** Add lines 1 through 11	1,720,083	1,643,823	1,149,721	
Operating and Administrative Expenses	13	Compensation of officers, directors, trustees, etc	113,150			113,150
	14	Other employee salaries and wages	51,420			51,420
	15	Pension plans, employee benefits	19,142			19,142
	16a	Legal fees (attach schedule)	1,925			1,925
	b	Accounting fees (attach schedule)	30,875	12,450		18,425
	c	Other professional fees (attach schedule)	95,343	74,875	74,875	20,468
	17	Interest				
	18	Taxes (attach schedule) (see instructions)	53,297			
	19	Depreciation (attach schedule) and depletion	1,904			
	20	Occupancy	38,308			38,308
	21	Travel, conferences, and meetings				
	22	Printing and publications				
	23	Other expenses (attach schedule)	128,468	13,082	13,082	115,386
	24	**Total operating and administrative expenses.** Add lines 13 through 23	533,832	100,407	87,957	378,224
	25	Contributions, gifts, grants paid	1,282,500			1,282,500
	26	**Total expenses and disbursements.** Add lines 24 and 25	1,816,332	100,407	87,957	1,660,724
	27	Subtract line 26 from line 12				
	a	**Excess of revenue over expenses and disbursements**	-96,249			
	b	**Net investment income** (if negative, enter -0-)		1,543,416		
	c	**Adjusted net income**(if negative, enter -0-)			1,061,764	

Part II Balance Sheets 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
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	1,371,645	1,903,339	1,903,339
	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) ▶ 101,184			
	Less allowance for doubtful accounts ▶		101,184	101,184
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	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)	39,077,711	42,706,339	42,706,339
	14 Land, buildings, and equipment basis ▶ 30,897			
	Less accumulated depreciation (attach schedule) ▶ 17,520	15,352	13,377	
	15 Other assets (describe ▶)			
	16 **Total assets** (to be completed by all filers—see the instructions Also, see page 1, item I)	40,464,708	44,724,239	44,710,862
Liabilities	17 Accounts payable and accrued expenses			
	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 ▶)	290	2,122	
	23 **Total liabilities**(add lines 17 through 22)	290	2,122	
Net Assets or Fund Balances	**Foundations that follow SFAS 117, check here ▶ ☑ and complete lines 24 through 26 and lines 30 and 31.**			
	24 Unrestricted	39,725,897	43,894,713	
	25 Temporarily restricted	628,521	717,404	
	26 Permanently restricted	110,000	110,000	
	Foundations that do not follow SFAS 117, check here ▶ ☐ and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg , and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 **Total net assets or fund balances** (see instructions)	40,464,418	44,722,117	
	31 **Total liabilities and net assets/fund balances** (see instructions)	40,464,708	44,724,239	

Part III Analysis of Changes in Net Assets or Fund Balances

1	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)	1	40,464,418
2	Enter amount from Part I, line 27a	2	-96,249
3	Other increases not included in line 2 (itemize) ▶	3	4,353,948
4	Add lines 1, 2, and 3	4	44,722,117
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	44,722,117

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)
1 a	VANGUARD LT GAIN	P		
b	VANGUARD LT GAIN	P		
c	BNY MELLON ST GAIN	P		
d				
e				

	(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)
a	819,481		703,435	116,046
b	1,500,541		1,320,508	180,033
c	266,859			266,859
d				
e				

	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	
a				116,046
b				180,033
c				266,859
d				
e				

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7 }	2	783,783
3	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	266,859

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	2,041,657	38,582,085	0 052917
2015	1,940,001	40,417,860	0 047999
2014	2,300,609	42,259,981	0 054439
2013	1,368,863	41,088,444	0 033315
2012	692,623	36,613,664	0 018917

2	**Total** of line 1, column (d)	2	0 207587
3	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	3	0 041517
4	Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	4	41,583,112
5	Multiply line 4 by line 3	5	1,726,406
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	15,434
7	Add lines 5 and 6	7	1,741,840
8	Enter qualifying distributions from Part XII, line 4	8	1,660,724

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)**

1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter _____ **(attach copy of letter if necessary–see instructions)**		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% of Part I, line 27b	1	30,868
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	
3	Add lines 1 and 2	3	30,868
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	
5	**Tax based on investment income.** Subtract line 4 from line 3 If zero or less, enter -0-	5	30,868
6	Credits/Payments		
a	2017 estimated tax payments and 2016 overpayment credited to 2017 — 6a: 98,728		
b	Exempt foreign organizations—tax withheld at source — 6b:		
c	Tax paid with application for extension of time to file (Form 8868) — 6c:		
d	Backup withholding erroneously withheld — 6d:		
7	Total credits and payments Add lines 6a through 6d	7	98,728
8	Enter any **penalty** for underpayment of estimated tax Check here ☐ if Form 2220 is attached	8	
9	**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶	9	
10	**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶	10	67,860
11	Enter the amount of line 10 to be **Credited to 2018 estimated tax** ▶ 67,860 **Refunded** ▶	11	

Part VII-A **Statements Regarding Activities**

			Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		No
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)?	1b		No
	*If the answer is "Yes" to **1a** or **1b**, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities*			
c	Did the foundation file **Form 1120-POL** for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year **(1)** On the foundation ▶ $ _____ **(2)** On foundation managers ▶ $ _____			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ $ _____			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities*	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If "Yes," attach a conformed copy of the changes*	3		No
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T*	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
7	Did the foundation have at least $5,000 in assets at any time during the year? *If "Yes," complete Part II, col (c), and Part XV*	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶TN			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? *If "No," attach explanation* .	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017 (see instructions for Part XIV)? *If "Yes," complete Part XIV*	9		No
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses*	10		No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	

Website address ▶ WESTENDHOMEFOUNDATION ORG

14 The books are in care of ▶ MARGARET C CRAIG Telephone no ▶ (615) 383-1395

Located at ▶ 4525 HARDING ROAD STE 300 NASHVILLE TN ZIP+4 ▶ 37205

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 ▶ 15

16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16		No

See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the 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.

1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☑ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☑ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☑ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☑ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☑ No			
	(6) Agree to pay money or property to a government official? (**Exception.** Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). ☐ Yes ☑ No			
b	If any answer is "Yes" to 1a(1)–(6), did **any** of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? ☐ Yes ☑ No			
	If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to **all** years listed, answer "No" and attach statement—see instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☑ No			
b	If "Yes," did it have excess business holdings in 2017 as a result of **(1)** any purchase by the foundation or disqualified persons after May 26, 1969, **(2)** the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or **(3)** the lapse of the 10-, 15-, or 20-year first phase holding period? *(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2017).*	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		No

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

5a	During the year did the foundation pay or incur any amount to				
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes	☑ No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes	☑ No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes	☑ No		
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions)	☐ Yes	☑ No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes	☑ No		
b	If any answer is "Yes" to 5a(1)–(5), did **any** 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)?			**5b**	
	Organizations relying on a current notice regarding disaster assistance check here ▶	☐			
c	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?	☐ Yes	☐ No		
	If "Yes," attach the statement required by Regulations section 53 4945–5(d)				
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes	☑ No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			**6b**	**No**
	If "Yes" to 6b, file Form 8870				
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes	☑ No		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?			**7b**	

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

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	Expense account, (e) 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	Expense account, (e) other allowances
CINDY DICKENSON 7355 NORTHWEST HWY FAIRVIEW, TN 37062	ADMIN/TECH M 40 00	51,420	2,187	

Total number of other employees paid over $50,000. . . . . ▶

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
NONE		

Total number of others receiving over $50,000 for professional services. . . . . ▶

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 THE WEST END HOME FOUNDATION FUNCTIONS AS A GRANT- MAKING FOUNDATION BY GRANTING MONIES TO NONPROFIT ORGANIZATIONS TO CARRY OUT CHARITABLE CAUSES	1,660,724
2	
3	
4	

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

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

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities	1a	41,877,576
b	Average of monthly cash balances	1b	338,781
c	Fair market value of all other assets (see instructions)	1c	0
d	**Total** (add lines 1a, b, and c)	1d	42,216,357
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	42,216,357
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	633,245
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4	5	41,583,112
6	**Minimum investment return.** Enter 5% of line 5	6	2,079,156

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)

1	Minimum investment return from Part X, line 6			1	2,079,156
2a	Tax on investment income for 2017 from Part VI, line 5	2a	30,868		
b	Income tax for 2017 (This does not include the tax from Part VI)	2b			
c	Add lines 2a and 2b			2c	30,868
3	Distributable amount before adjustments Subtract line 2c from line 1			3	2,048,288
4	Recoveries of amounts treated as qualifying distributions			4	10,000
5	Add lines 3 and 4			5	2,058,288
6	Deduction from distributable amount (see instructions)			6	
7	**Distributable amount** as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1			7	2,058,288

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	1,660,724
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	**Qualifying distributions.** Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	1,660,724
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	1,660,724

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
1 Distributable amount for 2017 from Part XI, line 7				2,058,288
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only.			1,323,280	
b Total for prior years 20___, 20___, 20___				
3 Excess distributions carryover, if any, to 2017				
a From 2012.				
b From 2013.				
c From 2014.				
d From 2015.				
e From 2016.				
f **Total** of lines 3a through e.				
4 Qualifying distributions for 2017 from Part XII, line 4 ▶ $ 1,660,724				
a Applied to 2016, but not more than line 2a			1,323,280	
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2017 distributable amount.				337,444
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2017				
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
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 —see instructions				
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				1,720,844
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. Subtract lines 7 and 8 from line 6a				
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. . . .				

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. . . . . ▶

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

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

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 e-mail address of the person to whom applications should be addressed

DIANNE OLIVER
109 KENNER AVENUE SUITE 202
NASHVILLE, TN 37205
(615) 383-1395
DIANNE OLIVER@WESTENDHOMEFOUNDATION ORG

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

SEE LINE 2A

c Any submission deadlines

SEE LINE 2A

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

SEE LINE 2A

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	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
a *Paid during the year* See Additional Data Table				
Total . . . . . ▶ **3a**				1,282,500
b *Approved for future payment*				
Total . . . . . ▶ **3b**				

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments. . . .					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities. . . .			14	829,777	
5 Net rental income or (loss) from real estate					
a Debt-financed property.					
b Not debt-financed property.					
6 Net rental income or (loss) from personal property					
7 Other investment income.			14	30,263	
8 Gain or (loss) from sales of assets other than inventory					783,903
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a BOOK SALES			41	72	
b OTHER INCOME			1	12,750	
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e). .				872,862	783,903
13 **Total.** Add line 12, columns (b), (d), and (e).				**13**	1,656,765

(See worksheet in line 13 instructions to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)
8	REPRESENTS SALE OF INVESTMENTS AND FIXED ASSETS

Part XVII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

			Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501 (c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a	Transfers from the reporting foundation to a noncharitable exempt organization of			
	(1) Cash	1a(1)		No
	(2) Other assets	1a(2)		No
b	Other transactions			
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		No
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)		No
	(3) Rental of facilities, equipment, or other assets	1b(3)		No
	(4) Reimbursement arrangements	1b(4)		No
	(5) Loans or loan guarantees	1b(5)		No
	(6) Performance of services or membership or fundraising solicitations	1b(6)		No
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		No

d If the answer to any of the above is "Yes," complete the following schedule Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☑ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

****** | 2018-10-10 | ******

Signature of officer or trustee | Date | Title

May the IRS discuss this return with the preparer shown below (see instr)? ☑ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ▶ ☐	PTIN
WILLIAM O DIX CPA		2018-10-10		P01045861
Firm's name ▶ GRANNIS & ASSOCIATES PC				Firm's EIN ▶20-0188015
Firm's address ▶ 515 W BURTON ST MURFREESBORO, TN 371303549				Phone no (615) 895-1040

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

(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
DIANNE OLIVER 5736 KNOB RD NASHVILLE, TN 37209	EXECUTIVE DI 40 00	113,150	3,395	550
MARGARET C CRAIG 4525 HARDING ROAD STE 300 NASHVILLE, TN 37205	TREASURER 10 00	0	0	0
TANZA FARR 1607 LINDEN AVE NASHVILLE, TN 37212	BOARD MEMBER 1 00	0	0	0
MARIBETH FARRINGER 243 HAVERFORD AVE NASHVILLE, TN 37205	BOARD MEMBER 1 00	0	0	0
KELLY GRAHAM 3102 WEST END AVE SUITE 750 NASHVILLE, TN 37203	BOARD MEMBER 1 00	0	0	0
KIM HARDIN 5912 ROBERT E LEE DR FOREST HILLS, TN 37215	PRESIDENT 10 00	0	0	0
COURTNEY HOLLINS 424 CHURCH ST STE 1401 NASHVILLE, TN 37219	PAST PRESIDE 1 00	0	0	0
PAULA HUGHEY 5120 BOXCROFT PL NASHVILLE, TN 37205	BOARD MEMBER 1 00	0	0	0
SUSAN KAESTNER 3210 DEL RIO PIKE FRANKLIN, TN 37069	BOARD MEMBER 1 00	0	0	0
DIMETA KNIGHT 3354 PERIMETER HILL DR SUITE 112 NASHVILLE, TN 37211	BOARD MEMBER 1 00	0	0	0
VANITA LYTLE-SHERRILL 1505 JOE PYRON DRIVE MADISON, TN 37115	BOARD MEMBER 1 00	0	0	0
ARIE NETTLES 605 BOWLING AVE NASHVILLE, TN 37215	BOARD MEMBER 1 00	0	0	0
SALLIE NORTON 4213 SNEED RD NASHVILLE, TN 37215	BOARD MEMBER 1 00	0	0	0
CAMMIE RASH 868 S CURTISWOOD NASHVILLE, TN 37204	BOARD MEMBER 1 00	0	0	0
SHARON REYNOLDS 1744 RICHBOURG PARK DR BRENTWOOD, TN 37027	SECRETARY 5 00	0	0	0

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

(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
CAROLINE SHOCKLEY 2413 FAIRFAX AVE NASHVILLE, TN 37212	BOARD MEMBER 1 00	0	0	0
MARGARET SMITH 3421 HAMPTON AVE NASHVILLE, TN 37215	VICE PRESIDE 5 00	0	0	0

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

Recipient Name and address (home or business)	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
a *Paid during the year*				
ALIVE HOSPICE1718 PATTERSON ST NASHVILLE, TN 37203			GRANT DISTRIBUTION	65,000
BETHLEHEM CENTERS 1417 CHARLOTTE AVE NASHVILLE, TN 37203			GRANT DISTRIBUTION	57,000
COUNCIL ON AGING 95 WHITE BRIDGE RD SUITE 114 NASHVILLE, TN 37205			GRANT DISTRIBUTION	165,000
Total . . . . . ▶ 3a				1,282,500

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

Recipient Name and address (home or business)	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
a *Paid during the year*				
FAITH FAMILY MEDICAL CENTER 326 21ST AVE NORTH NASHVILLE, TN 37203			GRANT DISTRIBUTION	50,000
SENIOR CITIZENS INC DBA FIFTYFORWARD174 RAINS AVE NASHVILLE, TN 37203			GRANT DISTRIBUTION	86,000
FRIENDS IN GENERAL INC 1818 ALBION ST NASHVILLE, TN 37208			GRANT DISTRIBUTION	20,000
Total . . . . . ▶ 3a				1,282,500

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

Recipient Name and address (home or business)	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
a *Paid during the year*				
GUARDIANSHIP AND TRUSTS CORPORATION 95 WHITE BRIDGE RD SUITE 330 NASHVILLE, TN 37205			GRANT DISTRIBUTION	24,000
INTERFAITH DENTAL CLINIC 1721 PATTERSON ST NASHVILLE, TN 37203			GRANT DISTRIBUTION	80,000
LEGAL AID SOCIETY300 DEADERICK ST NASHVILLE, TN 37201			GRANT DISTRIBUTION	15,000
Total . . . . . ▶ 3a				1,282,500

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

Recipient Name and address (home or business)	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
a *Paid during the year*				
MARTHA O'BRYAN CENTER 711 SOUTH 7TH STREET NASHVILLE, TN 37205			GRANT DISTRIBUTION	45,000
MID-CUMBERLAND HUMAN RESOURCE AGENC 1101 KERMIT DR SUITE 300 NASHVILLE, TN 37217			GRANT DISTRIBUTION	10,000
MUSIC FOR SENIORS161 RAINS AVE NASHVILLE, TN 37203			GRANT DISTRIBUTION	7,500
Total . . . . . ▶ 3a				1,282,500

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

Recipient Name and address (home or business)	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
a *Paid during the year*				
NASHVILLE FOOD PROJECT 3605 HILLSBORO PIKE NASHVILLE, TN 37215			GRANT DISTRIBUTION	45,000
NASHVILLE PUBLIC TELEVISION 161 RAINS AVE NASHVILLE, TN 37203			GRANT DISTRIBUTION	90,000
NEEDLINK NASHVILLE 1600-56TH AVENUE NORTH NASHVILLE, TN 37209			GRANT DISTRIBUTION	15,000
Total . . . . . ▶ 3a				1,282,500

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

Recipient Name and address (home or business)	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
a *Paid during the year*				
ROOFTOP FOUNDATION 3511 GALLITIN RD SUITE 202 NASHVILLE, TN 37126			GRANT DISTRIBUTION	5,000
ROOM IN THE INN INCPO BOX 25309 NASHVILLE, TN 37202			GRANT DISTRIBUTION	15,000
SECOND HARVEST FOOD BANK 331 GREAT CIRCLE ROAD NASHVILLE, TN 37228			GRANT DISTRIBUTION	75,000
Total . . . . . ▶ 3a				1,282,500

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

Recipient Name and address (home or business)	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
a *Paid during the year*				
SILOAM FAMILY HEALTH CENTER 820 GALE LN NASHVILLE, TN 37204			GRANT DISTRIBUTION	70,000
ST LUKE'S COMMUNITY HOUSE 5601 NEW YORK AVE NASHVILLE, TN 37209			GRANT DISTRIBUTION	55,000
TN JUSTICE CENTER 301 CHARLOTTE AVE NASHVILLE, TN 37201			GRANT DISTRIBUTION	50,000
Total . . . . . ▶ 3a				1,282,500

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

Recipient Name and address (home or business)	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
a *Paid during the year*				
UNITED CEREBRAL PALSY OF MIDDLE TN 1200-9TH AVE NORTH SUITE 110 NASHVILLE, TN 37208			GRANT DISTRIBUTION	30,000
WESTMINSTER HOME CONNECTION 3900 WEST END AVENUE NASHVILLE, TN 37205			GRANT DISTRIBUTION	208,000
Total . . . . . ▶ 3a				1,282,500

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TY 2017 Accounting Fees Schedule

Name: THE WEST END HOME FOUNDATION

EIN: 62-0516508

Accounting Fees Schedule

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTANTS - AUDIT/TAX	24,900	12,450		12,450
ACCOUNTANTS - BOOKKEEPING	5,975			5,975

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TY 2017 Depreciation Schedule

Name: THE WEST END HOME FOUNDATION

EIN: 62-0516508

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
1 ORIENTAL RUGS	1992-03-31	2,500	2,500	S/L	7 0000				
DESK	1985-02-21	88	79	S/L	10 0000				
2 - PAINTINGS	1988-12-31	300	300	S/L	10 0000				
(10) DINING ROOM CHAIRS	1989-04-30	4,452	4,452	S/L	10 0000				
2 CHAIRS - REUPHOLSTERED	1989-12-01	1,260	1,260	S/L	10 0000				
4 PICTURES	1991-05-31	125	125	S/L	7 0000				
TABLE	2007-12-07	4,078	4,078	S/L	7 0000				
COMPUTER W/ PRINTER	2009-02-18	1,117	875	S/L	10 0000	112			
OFFICE CREDENZA	2011-07-14	525	289	S/L	10 0000	52			
(2) HERMAN MILLER OFFICE CHAIRS	2012-01-10	655	328	S/L	10 0000	65			
ANTIQUE WALNUT 30" ROUND TABLE BREAK ROOM	2012-01-10	337	241	S/L	7 0000	48			
HP OFFICE COMPUTER	2012-01-17	1,136	558	S/L	10 0000	114			
MILANO2 72WX24D LH SINGLE PEDESTAL CRENDENZA	2016-01-13	679	97	S/L	7 0000	97			
MILANO2 72WX30D UNIVERSAL FREESTANDING PENINS	2016-01-13	698	100	S/L	7 0000	100			
ONE TOUCH TABLE W/ ELECTRICAL	2016-08-24	532	25	S/L	7 0000	76			
BUFFET HT CREDENZAALIMO25568	2016-08-24	1,026	49	S/L	7 0000	147			
(2) TAYCO GO TABLE W ELEC, DATA 28X72	2016-11-14	1,208	29	S/L	7 0000	172			
COMPUTER (AMAZON)	2016-01-22	1,039	190	S/L	5 0000	208			
OPTOMA HD141X 1080P 3DDLP HOME THEATER PROJEC	2016-06-30	600	43	S/L	7 0000	86			
LEASEHOLD IMPROVEMENTS	2016-12-30	7,795		S/L	15 0000	520			

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
FRONT OFFICE RUG	2016-12-30	747		S/L	7 0000	107			
(2) DINING ROOM CHAIRS	1989-04-30	890	890	S/L	10 0000				
1 ORIENTAL RUGS	1992-03-31	2,500	2,500	S/L	7 0000				

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TY 2017 Gain/Loss from Sale of Other Assets Schedule

Name: THE WEST END HOME FOUNDATION

EIN: 62-0516508

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
(2) DINING ROOM CHAIRS	1989-04	PURCHASE	2017-04		120	890			120	890
1 ORIENTAL RUGS	1992-03	PURCHASE	2017-12			2,500				2,500

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TY 2017 Investments - Other Schedule

Name: THE WEST END HOME FOUNDATION

EIN: 62-0516508

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
ALTERNATIVE INVESTMENTS		2,344,358	2,344,358
EQUITY		29,752,498	29,752,498
FIXED INCOME		10,609,483	10,609,483

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TY 2017 Land, Etc. Schedule

Name: THE WEST END HOME FOUNDATION

EIN: 62-0516508

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
EQUIPMENT	3,892	2,185	1,707	
FURNITURE AND FIXTURES	19,210	14,815	4,395	
LEASEHOLD IMPROVEMENTS	7,795	520	7,275	

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TY 2017 Legal Fees Schedule

Name: THE WEST END HOME FOUNDATION

EIN: 62-0516508

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL - OTHER	1,925			1,925

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TY 2017 Other Expenses Schedule

Name: THE WEST END HOME FOUNDATION

EIN: 62-0516508

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
ADP	2,260			2,260
GRANT RECIPIENT EVENT	1,743			1,743
HC-INVESTMENT EXPENSES	13,082	13,082	13,082	
COMMITTEE EXPENSE	73,015			73,015
INSURANCE	5,534			5,534
ADMIN-DUES / SUBS / MBRSHIPS	8,565			8,565
ADMIN-GIFTS AND ACKNOWLEDGEME	927			927
ADMIN - MISCELLANEOUS OFFICE	641			641
FOOD, TABLE, SUPPLIES	652			652

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADMIN-OFFICE SUPPLIES & PRINT	1,675			1,675
SENIOR TRUST	8,319			8,319
MAINTENANCE AND REPAIRS	4,672			4,672
OPERATING	7,383			7,383

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TY 2017 Other Income Schedule

Name: THE WEST END HOME FOUNDATION

EIN: 62-0516508

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
HC - OTHER INVESTMENT INCOME	30,263	30,263	30,263
BOOK SALES	72		72
OTHER INCOME	12,750		12,750

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TY 2017 Other Increases Schedule

Name: THE WEST END HOME FOUNDATION

EIN: 62-0516508

Description	Amount
UNREALIZED (GAIN) LOSS ON INVESTMENTS	4,353,948

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TY 2017 Other Liabilities Schedule

Name: THE WEST END HOME FOUNDATION

EIN: 62-0516508

Description	Beginning of Year - Book Value	End of Year - Book Value
PAYROLL LIABILITIES	290	2,122

TY 2017 Other Notes/Loans Receivable Short Schedule

Name: THE WEST END HOME FOUNDATION

EIN: 62-0516508

Name of 501(c)(3) Organization	Balance Due
FUNDS HELD BY HIRTLE CALLAGHAN	101,184

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TY 2017 Other Professional Fees Schedule

Name: THE WEST END HOME FOUNDATION

EIN: 62-0516508

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
HC-INVESTMENT MANAGEMENT FEES	33,470	33,470	33,470	
COMMUNICATIONS-WEBSITE & TECHNOL	18,814			18,814
COMMUNICATIONS-MARKETING & COMMU	1,654			1,654
VANGUARD INVESTMENT MANAGEMENT F	41,405	41,405	41,405	

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TY 2017 Taxes Schedule

Name: THE WEST END HOME FOUNDATION

EIN: 62-0516508

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADMIN-EXCISE TAX	53,297			

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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*

OMB No 1545-0047

2017

Name of the organization
THE WEST END HOME FOUNDATION

Employer identification number
62-0516508

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 1/3% 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)

Name of organization	Employer identification number
THE WEST END HOME FOUNDATION	62-0516508

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	ESTATE OF VIRGINIA TIPTON CRAIG 40 BURTON HILLS BOULEVARD SUITE 300 NASHVILLE, TN 37215	$ 62,418	☑ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions)

Name of organization	Employer identification number
THE WEST END HOME FOUNDATION	62-0516508

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
		$	
(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
		$	
(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
		$	

Name of organization
THE WEST END HOME FOUNDATION

Employer identification number
62-0516508

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	