

Return of Private Foundation

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

OMB No 1545-0052

Department of the 1'reasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

For	calend	lar year 2017 or tax year beginning	and ending					<u> </u>
	me of four		<u> </u>		A Emplo	oyer identification number		
		Sheperds Foundation			62-	-1842982		
		street (or P O box number if mail is not delivered to street address)	Ro	om/suite		hone number (see instruction:	s)	
		Hidden River Lane			61:	5-371-0030		——— <i>l</i>
•	-	, state or province, country, and ZIP or foreign postal code klin TN 37069-6	022		C If exer	mption application is pending,	, check here	▶ □
G	Sneck a		rn of a former public cl	nanty	D 1. Fo	reign organizations, check he	ere	
		Final return Amended	_			reign organizations meeting t		. 🗀
		Address change Name cha	_ _	- A - 1	85	% test, check here and attach	n computation	-
		type of organization: 🏿 Section 501(c)(3) exempt private		04		ate foundation status was terr	ninated under	. []
			le private foundation		section	n 507(b)(1)(A), check here		
		ket value of all assets at J Accounting method:	X Cash Acc	rual		foundation is in a 60-month te		. [
		ear (from Part II, col. (c), Other (specify)			under	section 507(b)(1)(B), check h	nere	P []
	ne 16) I		be on cash basis.)				<u> </u>	
_	ana/	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net inv	estment	(c) Adjusted net	(d) Disbursem for chantab	
S		the amounts in column (a) (see instructions))	books	incor	ne	ıncome	purposes (cash basis o	
\nearrow	1	Contributions, gifts, grants, etc , received (attach schedule)	1,100,250		7. U.A	71.5 J. A. 100.00.10		73.78
ANNED	2	Check ▶ ☐ if the foundation is not required to attach Sch B	. 2.34 7 33	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			11 11: 11: 11	77
m	3	Interest on savings and temporary cash investments	480		480		2.232.32	374
Ö	4	Dividends and interest from securities	9,144		9,144		2 34 440 37	THE STATE OF THE S
	5a	Gross rents	102,463	1	02,463		V. 38 28 22	W. W.
۲ <u>۶</u>	Ь	Net rental income or (loss) 1,319	1.60.1.11.11.11	Chr. Halla	74.7		SW 20 24 3	<i>777</i>
P O 5	6a	Net gain or (loss) from sale of assets not on line 10	10,296	#	\$7.972		7. No3. Sept. 1887	
ر الا الح الا الح	b	Gross sales price for all assets on line 6a 143,802		1/4/1/1/1		W-W-3077X; W-9	:47,48 :24.0	
	7	Capital gain net income (from Part IV, line 2)			10,296		(7×35×7,7)	/////////////////////////////////////
.018 .018	8	Net short-term capital gain	12 · M 48 · M 48 · M	111111111111111111111111111111111111111	04.40	0	(A. 9)	777
0	9	Income modifications	97. 74. 64. 78. 38. 38. 38. 38. 38. 38. 38. 38. 38. 3				8 9 75 T	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	10a	Gross sales less returns and allowances	20 10 30 30 10 11	14.14.14	4.9/2	90 Mar 200 190 Mar 200 1	12 10 10 10 10 10	12.0
	Ь	Less. Cost of goods sold			16.00	32 S. D. M. 12:11		
	С	Gross profit or (loss) (attach schedule)			97590.9			
	11	Other income (attach schedule)						
	12	Total. Add lines 1 through 11	1,222,633	1	22,383	0	16. Om 16. Jul	94. J.
- CO	13	Compensation of officers, directors, trustees, etc.	0					
enses	14	Other employee salaries and wages						1
Ē	15	Pension plans, employee benefits						
×	16a	Legal fees (attach schedule)					- E n	<u> </u>
e Lu	b	Accounting fees (attach schedule) Stmt 1	1,000	L	1,000		N 2 2 2011	(SO SE
₹.	С	Other professional fees (attach schedule)			!	의 .		
Ţ	17	Interest					TOEN L	T_
j.	18	Taxes (attach schedule) (see instructions) Stmt 2	22		22			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
흫	19	Depreciation (attach schedule) and depletion Stmt 3	45,457		45,457		9:34 732	<u> 20: 7</u>
Ş	20	Occupancy	5,630		5,630		<u> </u>	
9	21	Travel, conferences, and meetings	<u></u>	ļ			<u> </u>	
Operating and Administrative Ex	22	Printing and publications		 		ļ	 	
g	23	Other expenses (att sch) Stmt 4	53,786	 _	53,786	 	 	
atiı	24	Total operating and administrative expenses.		_		_	1	_
ē	1	Add lines 13 through 23	105,895		05,895			0
o	25	Contributions, gifts, grants paid	10,000		<u> </u>	- 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		,000
_	26	Total expenses and disbursements. Add lines 24 and 25	115,895		05,895		2 2 2 2 3	,000
	27	Subtract line 26 from line 12:						Lik.
	а	Excess of revenue over expenses and disbursements	1,106,738		16 400	E 30. 2 1 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	North State () () ()	<u> Na Spille</u>
	Ь	Net investment income (if negative, enter -0-)		77 <u>3</u> 7 29	16,488	Kall		Mini
	l c	Adjusted net income (if negative, enter -0-)		Samuel and But	Sec. 16 5 16	, U	14. <i>08.4.2.25</i>	04.15114

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11/4	Part I	Balance Sheets Attached schedules and amounts in the description column should be for end-of-war amounts only. (See instructions.)	Beginning of year	End o	f year
inter-		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
- [1	Cash – non-interest-bearing	6,431	10,087	10,087
-	2	Savings and temporary cash investments	574,314	29,640	29,640
- }	3	Accounts receivable ▶		2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.	Enil Malladia/Mall
1		Less¹ allowance for doubtful accounts ▶			
-	4	Pledges receivable ▶			4.420.4.507.50
l		Less: allowance for doubtful accounts ▶	L		
ı	5	Grants receivable			
-1	6	Receivables due from officers, directors, trustees, and other			
- 1		disqualified persons (attach schedule) (see	ł		
1		instructions)			
1	7	Other notes and loans receivable (att. schedule)			
- (Less: allowance for doubtful accounts ▶ 0			
2	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
AS	10a	Investments – U.S. and state government obligations (attach schedule)			
	b	Investments – corporate stock (attach schedule) See Stmt 5	281,785	224,898	259,456
ł	С	Investments – corporate bonds (attach schedule)			
1	11	Investments – land, buildings, and equipment basis			
1		Less accumulated depreciation (attach sch.)			
- (12	Investments – mortgage loans			
- {	13	Investments – other (attach schedule) See Statement 6	509,271	512,977	548,259
- 1	14	Land, buildings, and equipment basis ▶ 949,695		3/3/2/3/3/4/2/	
1		Less accumulated depreciation (attach sch) ▶ Stmt 7 46,867	928,905	902,828	950,000
ĺ	15	Other assets (describe See Statement 8)	5,050,000	6,700,000	6,700,000
]	16	Total assets (to be completed by all filers – see the			
]		instructions. Also, see page 1, item I)	7,350,706	8,380,430	8,497,442
٦	17	Accounts payable and accrued expenses			
- [18	Grants payable			
Liabilities	19	Deferred revenue			
띜	20	Loans from officers, directors, trustees, and other disqualified persons			
톒	21	Mortgages and other notes payable (attach schedule)			F3467432
괵	22	Other liabilities (describe >			
	23	Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here			
ces		and complete lines 24 through 26 and lines 30 and 31.	j]	
2	24	Unrestricted	L		
믕	25	Temporarily restricted	L		
뭐	26	Permanently restricted	<u> </u>		
Š		Foundations that do not follow SFAS 117, check here	1	ļ	
비		and complete lines 27 through 31.		ļ	
Net Assets or Fund Balan	27	Capital stock, trust principal, or current funds	L	! 	
ě	28	Paid-in or capital surplus, or land, bldg., and equipment fund	<u> </u>		
Si	29	Retained earnings, accumulated income, endowment, or other funds	7,350,706	8,380,430	
당	30	Total net assets or fund balances (see instructions)	7,350,706	8,380,430	
Ž	31	Total liabilities and net assets/fund balances (see	\	[
		instructions)	7,350,706	8,380,430	# # # # # # # # # # # # # # # # # # #
34	Part I	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 (mu	ist agree with		
	end-	of-year figure reported on pnor year's return)		1_1_	7,350,706
2	Ente	r amount from Part I, line 27a		2	1,106,738
3	Othe	r increases not included in line 2 (itemize) ▶		3	
		lines 1, 2, and 3		4	8,457,444
5		eases not included in line 2 (Itemize) ▶ See Statement 9		5	77,014
_6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30		8,380,430
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Part IV Capital Gains a	nd Losses for Tax on Investme	ent Income				
(a) List and describe	the kind(s) of property sold (for example, real estate, arehouse, or common stock, 200 shs MLC Co)		(b) How acquired P – Purchase D – Donation	(c) Date at (mo , day		(d) Date sold (mo , day, yr)
1a See Worksheet						
b						
С						
<u>d</u>			 			
<u>e</u>						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	,	or other basis pense of sale		(h) Gain ((e) plus (f)	
<u>a</u>						
<u>b</u>						
<u> </u>						
_ <u>d</u>				•		
Complete only for assets showing	g gain in column (h) and owned by the fo	oundation on 12/3	1/69.	<i>(</i> 1)		<u> </u>
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exc	cess of col (i)		•	(h) gain minus ess than -0-) or om col (h))
a						
b						
С						
_d						
<u>e</u>	T 16 asia also astavia	Port Line 7	 			· · · · · · · ·
2 Capital gain net income or (net o	rapital loss) If gain, also enter in If (loss), enter -0- in			2		10,296
	ss) as defined in sections 1222(5) and (6	· _				
~	s, column (c) See instructions. If (loss), e	enter -0- in				
Part I, line 8	nder Section 4040(a) for Dadus		t lavostasant lass	3		1,745
	nder Section 4940(e) for Reduc			nne		
	e foundations subject to the section 4940	(a) tax on net inve	suitent income.)			
If section 4940(d)(2) applies, leave t	his part blank					
	ction 4942 tax on the distributable amour		e base penod?			Yes X No
	alify under section 4940(e). Do not complete the under		king ony optrios			
(a)	each column for each year; see the insti	uctions before ma				(d)
Base period years Calendar year (or tax year beginning ii	Adjusted qualifying distributions	. Net va	(c) liue of nonchantable-use asse	ts		nbution ratio livided by col (c))
2016	7		5,952,	172	(00: (5)	(4)
2015			5,502,			
2014	5	,000	3,442,			0.001452
2013	3	,000	2,163,	348		0.001387
2012	84	,500	850,	095		0.099401
2 Total of line 1, column (d)				2		0.102240
	5-year base period - divide the total on	line 2 by 5 0, or by	the		1	
number of years the foundation	has been in existence if less than 5 year	s		3		0.034080
4 Enter the net value of nonchants	able-use assets for 2017 from Part X, line	e 5		4		7,814,622
5 Multiply line 4 by line 3				5	 	266,322
6 Enter 1% of net investment inco	me (1% of Part I, line 27b)			6	<u> </u>	165
7 Add lines 5 and 6				7		266,487
8 Enter qualifying distributions from			-4 4 1 40/ :	8		1,670,000
If line 8 is equal to or greater that Part VI instructions.	an line 7, check the box in Part VI, line 18	o, and complete th	aι paπ using a 1% tax	iate. See th	IE	

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SHEPERDS 06/16/2018 2 23 PM oon_pr(2017) The Sheperds Foundation

	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4940(b)	48 - see instruction	181			age -	
			197 1		. 34 34dh	/// ////iii	
та	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/AD Date of ruling or determination letter (attach copy of letter if necessary—						
	, , ,	see instructions)	1		G. Aire	165	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		[2772.77	7000000		
	here X and enter 1% of Part I, line 27b		1 8/4		Maria S		
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of	_	- passon	(Ottobio)	· hinkli obilio	anani ii	
_	Part I, line 12, col. (b).	onton ()	2			0	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, 6	enter -o-)	3	├──		165	
3	Add lines 1 and 2 Subtitle A (income) toy (demostra control 4047/s)(1) trusts and toyable foundations only others.	ontor (I)	4	 		105	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	enter -0-)	5	 		165	
5							
6	Credits/Payments:		- 1830	¥ 55%			
a	2017 estimated tax payments and 2016 overpayment credited to 2017			11111			
b	Exempt foreign organizations – tax withheld at source 6b 6c			Miller 1	77. PH.		
C	Tax paid with application for extension of time to file (Form 8868)						
d	Backup withholding erroneously withheld 6d 6d		— ::::::::::::::::::::::::::::::::::::	 	White her i	men me	
7	Total credits and payments. Add lines 6a through 6d		7	\vdash			
8	Enter any penalty for underpayment of estimated tax. Check hereif Form 2220 is attached		8	\vdash		165	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	┼──		165	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	P. ()	10	+			
11 ******	Enter the amount of line 10 to be: Credited to 2018 estimated tax	Refunded ▶	11	Ь			
Pa	ift VIII-A Statements Regarding Activities				E3328.1 **	T	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation	1 or ala it			Yes		
	participate or intervene in any political campaign?	N = 41 =			1a	<u> </u>	
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? S	ee the			1	x	
	Instructions for the definition				1b	- 	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any	matenais					
	published or distributed by the foundation in connection with the activities.			N/A	n." E. \$ 6860		
С	Did the foundation file Form 1120-POL for this year?			N/A	1c	8	
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. \$ \$						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure to	ax imposed			1000		
_	on foundation managers. • \$					~{~~	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		
_	If "Yes," attach a detailed description of the activities.						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instru				3	X	
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the ch	nanges			-	$\frac{\mathbf{x}}{\mathbf{x}}$	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			N/A	4a 4b	 ^	
b	If "Yes," has it filed a tax return on Form 990-T for this year?			H/A	5	 x	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				73.7		
e	If "Yes," attach the statement required by General Instruction T. Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					***	
6					77,78,7		
	 By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory dire 	actions that					
	conflict with the state law remain in the governing instrument?	Cuons mat			6 X	(* 10.0*000	
-	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 Y\/		7 X		
7	Enter the states to which the foundation reports or with which it is registered. See instructions.		. a		17. 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
8a	TN					Wwi.	
L	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorn	nev General					
b	(or designate) of each state as required by General Instruction G? If "No," attach explanation	ey General			8b X	u sasar	
0	Is the foundation claiming status as a private operating foundation within the meaning of section	4942(i)/3) or			80 A		c
9	4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017? See instructions for Parl				POSICIONE SECTION	1862863	_
					9	\mathbf{x}^{\prime}	/
10	complete Part XIV Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule	listing their			-		
10	• •	, nating their			10	x	
	names and addresses		_		Form 990-F		

Page 5 Statements Regarding Activities (continued) Yes No 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 X 11 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 X 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A Michael J. Nacarato, Jr. Telephone no. ▶ 615-371-0030 14 The books are in care of 2435 Hidden River Lane Located at Franklin ZIP+4 ▶ 37069-6933 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here 15 and enter the amount of tax-exempt interest received or accrued during the year 16 At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? 16 See the instructions for exceptions and filing requirements for FinCEN Form 114 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. Yes During the year, did the foundation (either directly or indirectly): X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? No Yes X (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? No X (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? No (5) Transfer any income or assets to a disqualified person (or make any of either available for X No the benefit or use of a disqualified person)? (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 X No termination of government service, if terminating within 90 days.) Yes If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations N/A 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 Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that N/A were not corrected before the first day of the tax year beginning in 2017? 1c Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private 2 operating foundation defined in section 4942(i)(3) or 4942(i)(5)): At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and X No 6e, Part XIII) for tax year(s) beginning before 2017? if "Yes," list the years ▶ 20 . 20 , 20 . 20 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 N/A all years listed, answer "No" and attach statement - see instructions) If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. За Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? X No 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.) N/A 3b Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its X chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?

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Pa	Information About Officers, Directors, Trustees, F	oundation Managers, Highly Paid E	mployees,
	and Contractors (continued)		
3	Five highest-paid independent contractors for professional services. See	instructions. If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NO	NE	ļ	
		i	
		İ	
			
		ł	
		;	
Total	number of others receiving over \$50,000 for professional services	 	<u>N</u>
Pa	Summary of Direct Charitable Activities		
	the foundation's four largest direct chantable activities during the tax year. Include relevant statistical informizations and other beneficianes served, conferences convened, research papers produced, etc.	mation such as the number of	Expenses
1	Direct Support to needing families		
	**		
2	Provide donations to various Nashville	area charities	
			10,000
3	Development of an Art museum		
_			1,650,000
4			1
			<u> </u>
	Summary of Program-Related Investments (see	instructions)	
	cribe the two largest program-related investments made by the foundation during the tax year on lines 1 a	nd 2	Amount
1	N/A		
			
2			†
<u>, , , , , , , , , , , , , , , , , , , </u>	the average soleted associated to the control of th		
3	ther program-related investments. See instructions		
3			
Total	. Add lines 1 through 3		
·vul	riga mico i unoughto	, ,, ,, ,, ,, ,, , ,	Ī

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	10,000
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.,	1 1	
	purposes	2	1,660,000
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1,670,000
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	165
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,669,835

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.

Form 990-PF (2017)

62-1842982 Form 990-PF (2017) The Sheperds Foundation Page 9 Undistributed Income (see instructions) (d) (a) (b) (c) Years prior to 2016 2016 2017 Corpus Distributable amount for 2017 from Part XI, 390,566 line 7 Undistributed income, if any, as of the end of 2017 2 255,459 a Enter amount for 2016 only b Total for prior years: 20 , 20 Excess distributions carryover, if any, to 2017: a From 2012 From 2013 From 2014 d From 2015 e From 2016 Total of lines 3a through e Qualifying distributions for 2017 from Part XII, 1,670,000 line 4 ▶ \$ ___ 255,459 a Applied to 2016, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) 390,566 d Applied to 2017 distributable amount 1,023,975 e Remaining amount distributed out of corpus Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: 1,023,975 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 Undistributed income for 2016. Subtract line 4a from line 2a Taxable amount - see f Undistributed income for 2017. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018 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) Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a Analysis of line 9 Excess from 2013 Excess from 2014 Excess from 2015 Excess from 2016 1,023,975

Excess from 2017

Pa	R XIV Private Operating For	undations (see in	structions and Pa	rt VII-A, question 9)	
1a	If the foundation has received a ruling or	determination letter th	at it is a private opera	ting		
	foundation, and the ruling is effective for	2017, enter the date of	of the ruling	•		
ь	Check box to indicate whether the found		_	bed in section 49	942(j)(3) or 494	12(1)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		7
2.0	income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
		(u) 2011	(,	(4) = 1	<u> </u>	
	investment return from Part X for					
	each year listed					
b	85% of line 2a					 /
С	Qualifying distributions from Part XII,			}		
	line 4 for each year listed		 	 		
ď	Amounts included in line 2c not used directly					İ
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					<u> </u>
3	Complete 3a, b, or c for the					
	alternative test relied upon.					
а	"Assets" alternative test – enter					
	(1) Value of all assets	 				<u> </u>
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(ı)					<u> </u>
b	"Endowment" alternative test - enter 2/3					
	of minimum investment return shown in		{			
	Part X, line 6 for each year listed		ļ			<u> </u>
С	"Support" alternative test - enter					
	(1) Total support other than gross		ł	1		
	investment income (interest					
	dividends, rents, payments on			į l		
	securities loans (section	}		ļ		
	512(a)(5)); or royalties)			 		<u> </u>
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(III)		İ	1	1	
	(3) Largest amount of support from			 		
	an exempt organization					
	(4) Gross investment income			 		
, B	Supplementary Infor	nation (Complete	this part only if	the foundation h	ad \$5 000 or mo	re in assets at
14525	any time during the y	•	-	the foundation in	au \$5,000 or mo	ie iii assets at
_			110113.7			
1	Information Regarding Foundation Ma List any managers of the foundation who		a than 20/ of the total	annich diana masi and	h the foundation	
а					•	
	before the close of any tax year (but only		ed more than \$5,000).	(See section 507(a)(2)		\$1,100,000
	Michael J. Nacarato		41			\$1,100,000
b	List any managers of the foundation who				portion of the	
	ownership of a partnership or other entit	y) of which the foundar	tion has a 10% or grea	iter interest.		
	N/A					
2	Information Regarding Contribution,					
	Check here ▶ X if the foundation onl	-				
	unsolicited requests for funds. If the four		rants, etc., to individua	ls or organizations und	er other conditions,	
	complete items 2a, b, c, and d. See inst					
а	The name, address, and telephone num	ber or email address of	of the person to whom	applications should be	addressed	
	N/A					
			· · · · · · · · · · · · · · · · · · ·			
b	The form in which applications should be	e submitted and inform	nation and materials th	ey should include:		
	N/A					
C	Any submission deadlines:					
	N/A					
ď	Any restrictions or limitations on awards	, such as by geograph	ical areas, charitable f	ields, kinds of institutio	ns, or other	
	factors:					
	N/A					
			_ _	- -		Form 990-PF (201

3 Grants and Contributions Paid During th	e Year or Annroyed for	Future Payment		<u> </u>
· Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Sonanbadon	
a Paid during the year Second Harvest Food Bank 331 Great Circle Road Nashville TN 37228	None	501(c)(3) Opera	ing fund	10,000
		1	1	
			1	
	•			
			1	
			1	
			1	
]	
3				
]	
			1	
			1 1	
			1	•
Tabel	<u> </u>		▶ 3a	10,000
Total b Approved for future payment		<u> </u>	> 3a	10,000
N/A				
]	
			.	
Total			▶ 3b	

SKall YAL	A Analysis of Income-Producing A	ACTIVITIES				
Enter gross a	mounts unless otherwise indicated.	Unrelated bus	iness income	Excluded by	section 512, 513, or 514	(e)
,	•	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1 Program	service revenue.			+		(369 (13) (30)
	 	-		+		
		- 		+		
		- 		 		
		-	_ 	 	 +	
_		- 		 		
f	-,-,-,	- -		 	+	
	and contracts from government agencies	 		++		
	hip dues and assessments			++		
	n savings and temporary cash investments			14	478	2
	s and interest from securities	27057706. 16. 700	7.40. M	14	7,833	1,311
	l income or (loss) from real estate:	25/96/94/28	<u> </u>	<u>~475,200,7465</u>		
	financed property					
	ebt-financed property					1,319
	I income or (loss) from personal property			- -		
	estment income			 		
-	oss) from sales of assets other than inventory			14	6,523	3,773
	ne or (loss) from special events					
	ofit or (loss) from sales of inventory	 		+		
11 Other rev		- -		+		
		_		+		
		_		++		
с						
d				++		
c d				0.238223	14 934	6 405
c d e 12 Subtotal.	Add columns (b), (d), and (e)			0	14,834	6,405
c d e 12 Subtotal. 13 Total. Ad	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e)			0	14,834	6,405 21,239
cd e 12 Subtotal. 13 Total. Ad (See workshe	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations.)					
d e 12 Subtotal. 13 Total. Ad (See workshe	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) Relationship of Activities to the	Accomplishment	of Exempt I	Purposes	13	
c d le le le le le le le le le le le le le	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) Relationship of Activities to the Explain below how each activity for which inco	Accomplishment	t of Exempt I nn (e) of Part XV	Purposes	13ed importantly to the	21,239
d e 12 Subtotal. 13 Total. Ad (See workshe Part. XVI-	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) Relationship of Activities to the	Accomplishment	t of Exempt I nn (e) of Part XV	Purposes	13ed importantly to the	21,239
d e 12 Subtotal. 13 Total. Ad (See workshe Part. XVI-	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) Relationship of Activities to the Explain below how each activity for which inco	Accomplishment	t of Exempt I nn (e) of Part XV	Purposes	13ed importantly to the	21,239
d e 12 Subtotal. 13 Total. Ad (See workshe Part. XVI-	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) Relationship of Activities to the Explain below how each activity for which inco	Accomplishment	t of Exempt I nn (e) of Part XV	Purposes	13ed importantly to the	21,239
d e 12 Subtotal. 13 Total. Ad (See workshe Part. XVI-	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) Relationship of Activities to the Explain below how each activity for which inco	Accomplishment	t of Exempt I nn (e) of Part XV	Purposes	13ed importantly to the	21,239
d e 12 Subtotal. 13 Total. Ad (See workshe Part. XVI-	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) Relationship of Activities to the Explain below how each activity for which inco	Accomplishment	t of Exempt I nn (e) of Part XV	Purposes	13ed importantly to the	21,239
d e 12 Subtotal. 13 Total. Ad (See workshe Part. XVI-	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) Relationship of Activities to the Explain below how each activity for which inco	Accomplishment	t of Exempt I nn (e) of Part XV	Purposes	13ed importantly to the	21,239
c d e 12 Subtotal. 13 Total. Ad (See workshe Part XVI-Line No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) Relationship of Activities to the Explain below how each activity for which inco	Accomplishment	t of Exempt I nn (e) of Part XV	Purposes	13ed importantly to the	21,239
c d e 12 Subtotal. 13 Total. Ad (See workshe Part XVI-Line No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) Relationship of Activities to the Explain below how each activity for which inco	Accomplishment	t of Exempt I nn (e) of Part XV	Purposes	13	21,239
c d e 12 Subtotal. 13 Total. Ad (See workshe Part XVI-Line No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) Relationship of Activities to the Explain below how each activity for which inco	Accomplishment	t of Exempt I nn (e) of Part XV	Purposes	13	21,239
c d e 12 Subtotal. 13 Total. Ad (See workshe Part XVI-Line No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) Relationship of Activities to the Explain below how each activity for which inco	Accomplishment	t of Exempt I nn (e) of Part XV	Purposes	13	21,239
c d e 12 Subtotal. 13 Total. Ad (See workshe Part XVI-Line No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) Relationship of Activities to the Explain below how each activity for which inco	Accomplishment	t of Exempt I nn (e) of Part XV	Purposes	13	21,239
c d e 12 Subtotal. 13 Total. Ad (See workshe Part XVI-Line No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) Relationship of Activities to the Explain below how each activity for which inco	Accomplishment	t of Exempt I nn (e) of Part XV	Purposes	13	21,239
c d e 12 Subtotal. 13 Total. Ad (See workshe Part XVI-Line No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) Relationship of Activities to the Explain below how each activity for which inco	Accomplishment	t of Exempt I nn (e) of Part XV	Purposes	13	21,239
c d e 12 Subtotal. 13 Total. Ad (See workshe Part XVI-Line No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) Relationship of Activities to the Explain below how each activity for which inco	Accomplishment	t of Exempt I nn (e) of Part XV	Purposes	13	21,239
c d e 12 Subtotal. 13 Total. Ad (See workshe Part XVI-Line No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) Relationship of Activities to the Explain below how each activity for which inco	Accomplishment	t of Exempt I nn (e) of Part XV	Purposes	13	21,239
c d e 12 Subtotal. 13 Total. Ad (See workshe Part XVI-Line No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) Relationship of Activities to the Explain below how each activity for which inco	Accomplishment	t of Exempt I nn (e) of Part XV	Purposes	13	21,239
c d e 12 Subtotal. 13 Total. Ad (See workshe Part XVI-Line No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) Relationship of Activities to the Explain below how each activity for which inco	Accomplishment	t of Exempt I nn (e) of Part XV	Purposes	13	21,239
c d e 12 Subtotal. 13 Total. Ad (See workshe Part XVI-Line No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) Relationship of Activities to the Explain below how each activity for which inco	Accomplishment	t of Exempt I nn (e) of Part XV	Purposes	13ed importantly to the	21,239
c d e 12 Subtotal. 13 Total. Ad (See workshe Part XVI-Line No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) Relationship of Activities to the Explain below how each activity for which inco	Accomplishment	t of Exempt I nn (e) of Part XV	Purposes	13ed importantly to the	21,239
c d e 12 Subtotal. 13 Total. Ad (See workshe Part XVI-Line No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) Relationship of Activities to the Explain below how each activity for which inco	Accomplishment	t of Exempt I nn (e) of Part XV	Purposes	13ed importantly to the	21,239
c d e 12 Subtotal. 13 Total. Ad (See workshe Part XVI-Line No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) Relationship of Activities to the Explain below how each activity for which inco	Accomplishment	t of Exempt I nn (e) of Part XV	Purposes	13ed importantly to the	21,239
c d e 12 Subtotal. 13 Total. Ad (See workshe Part XVI-Line No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) Relationship of Activities to the Explain below how each activity for which inco	Accomplishment	t of Exempt I nn (e) of Part XV	Purposes	13ed importantly to the	21,239
c d e 12 Subtotal. 13 Total. Ad (See workshe Part XVI-Line No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) Relationship of Activities to the Explain below how each activity for which inco	Accomplishment	t of Exempt I nn (e) of Part XV	Purposes	13ed importantly to the	21,239
c d e 12 Subtotal. 13 Total. Ad (See workshe Part XVI-Line No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) Relationship of Activities to the Explain below how each activity for which inco	Accomplishment	t of Exempt I nn (e) of Part XV	Purposes	13ed importantly to the	21,239

orm	990-PF (201	7) The Shepe	rds Fo	oundation		62-	1842982			Page 13
	r XVII	Information Regardate Exempt Organiza	arding Tra		Transactio	ns and Rela	tionships Wit	h Noncharitabl		
1	Did the orga	nization directly or indi	rectly engag	e in any of the follo	owing with any o	ther organization	n described		Ye	s No
•	= -	01(c) (other than section		· -		=				
а	Transfers fro	om the reporting found	ation to a no	onchantable exemp	t organization of	.			1a(1)	X
	(2) Other as	ecate							1a(2)	X
b	Other transa	actions:								
	(1) Sales of	f assets to a noncharita	able exempt	organization				(1b(1)	_ <u> X</u>
	(2) Purchas	ses of assets from a no	nchantable	exempt organizatio	n				1b(2)	X_
	(3) Rental of	of facilities, equipment,	or other ass	sets					1b(3)	X
	(4) Reimbu	rsement arrangements	}						1b(4)	X
	(5) Loans o	r loan guarantees							1b(5)	X
		ance of services or me	embership o	r fundraising solicita	ations				1b(6)	X
_		acilities, equipment, ma						1	1c	X
	_	er to any of the above is				nn (h) should a	lwave show the fa	ır market		
u		goods, other assets, o								
		transaction or shanng								
	a) Line no	(b) Amount involved	(c) Name	e of nonchantable exemp	t organization	(d) Des	scription of transfers, tra	nsactions, and sharing arr	angements	
N/I	<u> </u>		L							
								 		
		<u> </u>								
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		<u>l</u>	<u> </u>						 	
	described in	lation directly or indirect section 501(c) (other	than section			-exempt organi	zations	[Yes	X No
_ <u>b</u>		mplete the following sc	nequie.	T		r	4.5	nan af anletter et		
		a) Name of organization		(b) Type of or	ganization	 	(c) Descrip	tion of relationship		
	N/A			 						
										
										
				1						
				<u> </u>		l				
		natties of perjury, I declare the ind complete Declaration of p						ny knowledge and belief,	it is true,	
Sigi	1	no complete Declaration of p	oreparer (other	man taxpayer) is based	on all illiormation of	which preparer has	any ki kwiedge	May the IRS discu with the preparer See instructions		°
Her	e	Janes A N.	الممد	_	1.1.	1-1	A -		4_1	لــــــــــــــــــــــــــــــــــــــ
	2	MY 190 H 110	ualet	J	<i>b/</i>	1812018		<u>ident</u>		
	▼ Sign.	ature of officer or trustee			Dafte		Title			
	Print/Ty	pe preparer's name			Preparer's signatu	re ,	(Date	Ch	eck X if
د: ۵	}					~/.	$2 \cdot 11 \cdot 1$	nlı	se	f-employed
Paid	Larr	y Williams			Larry Wil	liams 📈	~~UW	LIEM \$6/16	/18	
Prep	l Ermic e	name Larry	Will:	iams, CPA				PTIN PO1	2208	27
Use (Only		owell	Pl				Firm's EIN ▶		
	i	T)		max 27025	7		l	615	212	9247

Form 990-PF	Capital Gains and Losse Dar year 2017, or tax year beginning	es for Tax on Investment I	ncome	2017
Name			Employer Ide	ntification Number
The Sheperds Four	ndation		62-1842	982
(a) List and describe 2-story brick was	e the kind(s) of property sold, e.g., real estate, rehouse, or common stock, 200 shs. MLC Co	(b) How acquired P-Purchase	(C) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
(1) RJ #28370191		D-Donation P	07/13/17	12/08/17
(2) RJ #28370191		P	07/06/16	12/08/17
(3) RJ #28370191		P	01/28/15	12/08/17
(4) RJ #339A7804		<u> </u>	12/23/16	07/11/17
(5) RJ #339A7804 (6) UBS 36056		P	12/23/16	12/28/17
(6) UBS 36056 (7) UBS 36056		P	10/14/16	12/18/17
(8) RJ acct #283701	191		1 20/21/20	12/20/21
(9) UBS acct #27243				1
(10)				
(11)				
(12)				
(13)			 	
(14)				
(13)	76-7-7, 46-45-46, 250-77-8-76-3.			<u> </u>
(e) Gross sales price	(f) Depreciation allowed	(g) Cost or other basis	(h) Gair	
(e) Gross sales price	(or allowable)	plus expense of sale	(e) plus (f) minus (g)
(1) 93,851		88,448		5,403
(2) 8,197		6,887		1,310
(3) 9,093		7,669		1,424
(4) 22,282 (5) 692		25,923 707	- 	-3,641 -15
1 4 4		233		-17
(6) 216 (7) 2,948	 	3,639		-691
(8) 24				24
(9) 6,499				6,499
(10)				
(11)				
(12)				
(13)	<u> </u>			
(14)				
(15)				
	ng gain in column (h) and owned by th	<u> </u>	<u> </u>	<u>, (1.16) 1900 - 111 1110 1907 1910</u>
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(i) Gains (Co col (k), but not le Losses (fron	ol (h) gain minus ss than -0-) Or n col (h))
(1)				5,403
(2)				1,310
(3)	 			1,424
(4) (5)	 		- 	-3,641 -15
(5) (6)	 	 		-15 -17
(7)	 		- 	-691
(8)			 	24
(9)				6,499
(10)				
(11)				
(12)	 			
(13)	 			
(14)		 		
(15)	l—————		- 	

SHEPERDS The Sheperds Foundation 62-1842982 FYE: 12/31/2017	dation	Federal	Federal Statements	ıts			6/16/2018 2:23 PM	13 PM
	Statement 1 - Fo	- Form 990-PF, Part I, Line 16b - Accounting Fees	Part I, Line 1	6b - Acc	unting Fees		`	
Description		Total	Net Investment	et ment	Adjusted Net	pə	Charitable Purpose	
Larry Williams, CPA Total	w w	1,000	w w	1,000	w w		1 1	101
	Statement 2 -	t 2 - Form 990-PF,	Part I,	Line 18 -	Taxes			
Description		Total	Net Investment	et ment	Adjusted Net	pa	Charitable Purpose	
Excise tax Foreign tax withheld	w.	22	w	22	w	·-	₩	
Total	₩	22	\$\$	22	w	0	₩.	01
	Statement 3 - Form 990-PF, Part I, Line	Form 990-P	F, Part I, Lin		19 - Depreciation			
Description	no							
Date Cost Acquired Basis	Prior Year Depreciation	Method	poq	Life	Current Year Depreciation	Net Investment Income	nent Adjusted Net	Net ne
4742 West Winds 12/30/16 \$ 930,315	\$ 1,410	S/Γ		27.5 \$	33,829	\$ 33,829	\$ 628	
Furniture & lixtures 7/01/17 19,380		200DB		ςς I	,628	11,		
Total \$ 949,695	\$ 1,410			∾	45,457	\$ 45,4	457 \$	°
								1-3

SHEPERDS The Sheperds Foundation		017
SHEPERDS	62-1842982	FYE: 12/31/2017

Federal Statements

6/16/2018 2:23 PM

15	Statement 4 - Form 990-PF,	- Form 990-PF, Part I, Line 23 - Other Expenses	r Expenses	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
	· •	w	ూ	₩.
4742 Westwinds				
Management fee .	25,190	25,190		
Housekeeping	322	322		
Maintenance & supplies	597	597		
Miscellaneous	1,269	1,269		
Insurance	6,664	6,664		
Registratation fee	150	150		
HOA fees	13,139	13,139		
Utilities		2,642		
Bank charges	84	. 84		
Expenses				
RJ acct fees	2,181	2,181		
Wire fee	147	147		
Bank fees	70	70		
UBS VX 36056 expense	1,181	1,181		
UBS annual fee	150	150		
Total	\$ 53,786	\$ 53,786	\$	\$

	Fair Market Value	\$ 154,911 104,545	\$ 259,456
Investments	Basis of Valuation	Cost	
990-PF, Part II, Line 10b - Corporate Stock Investmen	End of Year	132,638 92,260	224,898
10b - C	1	φ	₩
Part II, Line	Seginning of Year	181,784	281,785
990-PF	ш	w	₩.
Statement 5 - Form	Description	RJ acct #28370191 RJ acct #339A7804	Total

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SHEPERDS The Sheperds Foundation 62-1842982 FYE: 12/31/2017	Fe	Federal Statements	temei	nts		9	/16/201	6/16/2018 2:23 PM
Statement 6 -	- Form 99	90-PF, Part II	Line 1	Statement 6 - Form 990-PF, Part II, Line 13 - Other Investments	tments			
Description	Be	Beginning of Year	ļ	End of Year	Basis of Valuation		Fair Market Value	ket
2575.733 sh Templeton Global Bond Fd	ধ	36,630	ጭ	31,630	Cost	w	29	366
AMG Southern Sun US Equity		215,894		215,739	Cost		225	225,656
UBS VX 36056 equities		100,798		101,376	Cost		128	128,448
Invesco Equity & Income Fund		124,269	l	132,552	Cost		132,	552
Total	w	509,271	တူ	512,977		w.	548,	,259
Statement 7 - Form 990-PF, Part II, Line 14 - Land, Building, and Equipment	990-PF,	Part II, Line	14 - La	nd, Building, ar	nd Equipment			
Description		Beginning Net Book	ŏ	End Cost / Basis	End Accumulated Depreciation	ulated tion		Net FMV
Condo	₩	928,905	₩	949,695	\$ 46	46,867	φ.	950,000

Description	W-	Beginning Net Book		End Cost / Basis	End A Der	End Accumulated Depreciation		Net FMV
	₩	928,905	ᄵ	949,695	w	46,867	ςς.	950,000
Total	₩	928,905	₩.	949,695	w	46,867	₩	950,000

SHEPERDS The Sheperds Foundation

62-1842982

Federal Statements

FYE: 12/31/2017

Statement 8 - Form 990-PF, Part II, Line 15 - Other Assets

Description		Beginning of Year	_	End of Year	_	Fair Market Value
Paintings	\$_	5,050,000	\$_	6,700,000	\$_	6,700,000
Total	\$	5,050,000	\$	6,700,000	\$_	6,700,000

Statement 9 - Form 990-PF, Part III, Line 5 - Other Decreases

 Description
 Amount

 Prior period adjustment
 \$ 77,014

 Total
 \$ 77,014

Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

 Name of Manager
 Amount

 Michael J. Nacarato, Jr.
 \$ 1,100,000

 Total
 \$ 1,100,000

6/16/2018 2:23 PM

Schedule B

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

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Name of the organization

Employer identification number

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

The Sheperds	Foundation	62-1842982
Organization type (check or	ue)·	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private f	foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt chantable trust treated as a private found	dation
	501(c)(3) taxable private foundation	
Check if your organization is	covered by the General Rule or a Special Rule.	
	(7), (8), or (10) organization can check boxes for both the General Rule	and a Special Rule. See
General Rule		
-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contror property) from any one contributor. Complete Parts I and II. See instructions	_
Special Rules		
regulations under se 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 9 I that received from any one contributor, during the year, total contributor if the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line	990 or 990-EZ), Part II, line ons of the greater of (1)
contributor, during th	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that he year, total contributions of more than \$1,000 exclusively for religious, hal purposes, or for the prevention of cruelty to children or animals. Com	, chaпtable, scientific,
contributor, during the contributions totaled during the year for a	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that he year, contributions exclusively for religious, charitable, etc., purposes more than \$1,000. If this box is checked, enter here the total contribution exclusively religious, charitable, etc., purpose. Don't complete any of less to this organization because it received nonexclusively religious, character during the year	s, but no such ions that were received the parts unless the
990-EZ, or 990-PF), but it m	at isn't covered by the General Rule and/or the Special Rules doesn't fil iust answer "No" on Part IV, line 2, of its Form 990, or check the box on to certify that it doesn't meet the filing requirements of Schedule B (For	line H of its Form 990-EZ or on its

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Page 1 of 1

Page 2

Name of organization
The Sheperds Foundation

Employer identification number 62-1842982

Part I	Contributors (see instructions). Use duplicate copies of P	art I if additional space is no	eeded.
(a) ` No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Michael J. Nacarato, Jr. 2435 Hidden River Lane Franklin TN 37069-6933	\$ 1,100,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	·	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)