Department of the Treasury

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. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0052

2017

Internal Revenue Service										Open to Public Inspe	ection		
	For o	caler	ndar year 2017	or tax ye	ar beginning		, 2017, and endi					, 20	
	Nan	ne of	foundation							A Employe	A Employer identification number		
	PAU	JL-	-DRENNAN	FAMI	LY CHAR	ITABLE	TABLE FOUNDATION_				63-0967222		
	Nun	nber	and street (or P	.O box num	ber if mail is not d	livered to street address) Room/suite			B Telephone number (see instructions)				
	РО	BC	X 66001	0							(205) 871-1210		
,	City	or to	own, state or pr	ovince, co	untry, and ZIP	or foreign p	ostal code		****	C If exempti	on applicati	on is pending,	
	BIE	RMI	NGHAM A	L 352	66					check he	е		. ▶ ∏
	G C	heck	all that apply		Initial return		Initial return	of a former	public charity	D 1. Foreig	n organiza	ations, check here	▶□
				Γ	Final return	Г	Amended ret	turn		2. Foreign	organizatio	ns meeting the 85%	
					Address chan	ge 「	Name chang	e		_	•	d attach computation	·►∏
	H C	heck	type of organiz	zation.	X Section 50	01(c)(3) exe	mpt private fo	undation	ØW			n status was	_
	∏ s∈	ectio	n 4947(a)(1) no	nexempt o	charitable trust	Othe	r taxable priva	ite foundat	ion		ed under s)(A), checl		. ▶ ∏
	I Fa	ır ma	rket value of all	assets at	end of J	Accountin	g method 🔀	Cash	Accrual				
	yea	ar (fro	om Part II, col. ((c), line 16)	Other (specify)	-	_ ,			in a 60-month	
Ì	▶ \$	5		1,	705,877 (F	art I, colum	nn (d) must be	on cash b	asıs.)		on under)(B), checl	section k here · · · · ·	. ▶ 🏻
—	Par		Analysis of Re	venue an	d Expenses		venue and					(d) Disbursemen	
Ĺ			The total of ame				enses per	''	investment	(c) Adjuste		for charitable purposes	9
			amounts in colu			'	ooks	"	icome	incom	е	(cash basis on	ıly)
•		1	Contributions, gif (attach schedule)					1916					\$ ·
		2	Check X If to	he foundation	on is not required B		å 2,			9 \			
		3	Interest on saving	gs and temp.	cash investments	;			5				
		4	Dividends and	interest fr	om securities		18,761	-	18 , 761			- %;%%	7 4 W
		5a	Gross rents										
		b	Net rental income or (loss)			18 · 83	* 1422 10	. N * % * · ·	. × × × × × × × × × × × × × × × × × × ×	A now i know i	11 / 12/11 / 2	avion alum	· 6 2 6 74
	单	_	Net gain/(loss) fro		ssets not on line 10		149,510)		,			~ && 4
\mathcal{E}_{∞}	evenue	þ	Gross sales price all assets on line	for <u>1</u> 6a	,085,247	, se	· · · · · · · · · · · · · · · · · · ·	· je gjer dos 6			\$ 18 miles 1/4		Apple 1
	ا ۾	7	Capital gain net in	ncome (from	Part IV, line 2)	(A)	P 4 . "		149,510		•.	-	
	_	8	Net short-term	ı capıtal ga	an	2.		10 174	35 77		0		3
<u></u>		9	Income modific	cations		12× /*			,		0		🔅
2			Gross sales less returns & allowan	ces		0	<u> 第令。、</u>			~ 43 5km 4j 1	1 , , ,		<u> </u>
M		Ь	Less Cost of goods sold · · · ·		_	1.5			<u> </u>				<u> </u>
رب			Gross profit or		•			> 200 St. 1	, Martin 18.18				
=			Other income	•	•						0		· · · · · · · · · · · · · · · · · · ·
	_		Total. Add line		<u>ıh 11</u>		168,271		168,276				
- TI		13	Compensation of directors, trustee				0	<u> </u>					
~			Other employe		-								
	တ္က		Pension plans,										
00	use		Legal fees (atta		•							<u>-</u>	
	xbe		Accounting fee	-	•								
	Operating and Administrative Expenses		Other profession	onal tees (attach schedule)	-			DECI	IN/ER	7—		
	≨	17	Interest						PEGE	IVED			
	stra	18	Taxes (attach so		•			<u> </u>		 	ပ္က	· · · · · · · · · · · · · · · · · · ·	V 4962
	Ē	19	Depreciation (a		•			E1:14	MAY 1	6 2018	2		
	5		Occupancy .			1		<u> </u> u	1]	<u> </u>		
	ਰੂ		Travel, confere		-	 			OCHE	AP IIT			
	a	22	Printing and pu			-	11 000		OGDE	IV, UI			
	ţi.		Other expense			——	11,889	<u>'</u>					
	era		Total operation	-			11 000	1	^		<u></u>		^
			Contributions		•		11,889		0	19 a. 3.8	0	100	0 064,
	1		Contributions, Total exp. & d				100,064		· **** · · · · · · · · · · · · · · · ·	~ ~ * * * * * * * * * * * * * * * * * *	;		,064
-			Add lines 24 and	25		<u> </u>	111,953		<u></u>		U	TOO,	,004
			Subtract line 26 Excess of reve				56,318	, 20 10 10					302 2
			and disbursen	nents · · ·		3 392		 	160 076		118		
			Net investmen) ;; ; ;	1,	⊕ 4 * · · ·	168,276	233	2 3		300 5
	- 1	_	Adjusted net i	Income /-r	noo ontor-C \	1 3.50	. "77	NS N	-X-1-72015 (*)	ı		m 266 . * 2 3 85	NSC 320 1/2

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2017)



P	art II	Attached schedules and amounts in the description column should be for	Beginning of year	End	End of year		
	T	end-of-year amounts only. (See inst.)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash non-interest-bearing					
•	2	Savings and temporary cash investments	79,661	33,72			
	3	Accounts receivable >					
		Less allowance for doubtful accts.					
	4	Pledges receivable ▶		in the last			
		Less allowance for doubtful accts.					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
	7	disqualified persons (attach schedule) (see instructions) Other notes and loans			on co sould's		
		receivable (attach schedule) Less allowance for					
		doubtful accounts					
Assets	8	Inventories for sale or use					
lss.	9	Prepaid expenses and deferred charges					
•		Investments U.S. and state govt. obligations (attach schedule)					
		Investments corporate stock (attach schedule) #.2	1,033,870	1,068,243	1,068,243		
	1.1_	Investments corporate bonds (attach schedule)					
		and equipment basis · · · P	A 70		4 48 1 6		
		Less accumulated depreciation (attach schedule)					
	12	Investments mortgage loans					
	13	Investments other (attach schedule) · · · · · · · #3 ·	280,864	603,910	603,910		
	14	Land, buildings, and equipment basis					
		Less accumulated depreciation (attach schedule) · ·					
	15	Other assets (describe)					
	16	Total assets (to be completed by all filers see the					
		ınstructions. Also, see page 1, item I)	1,394,395	1,705,87	1,705,877		
	17	Accounts payable and accrued expenses					
	18	Grants payable					
Liabilities	19	Deferred revenue					
Ē	20	Loans from officers, directors, trustees, and other disqualified persons					
Ľ	21	Mortgages and other notes payable (attach schedule)					
	22	Other liabilities (describe ▶					
	23	Total liabilities (add lines 17 through 22)	0	(
		Foundations that follow SFAS 117, check here					
Ś		and complete lines 24 through 26, and lines 30 and 31.					
alances	24	Unrestricted					
ala	25	Temporarily restricted					
Fund B	26	Permanently restricted		****	10 30 16 20 014		
Ë		Foundations that do not follow SFAS 117, check here ▶					
ğ		and complete lines 27 through 31.			\$ \$ 1.00 p. 5.40 p. 5.		
ţ	27	Capital stock, trust principal, or current funds					
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund					
Ä	29	Retained earnings, accumulated income, endowment, or other funds	1,394,396	1,705,877			
ž	30	Total net assets or fund balances (see instructions)	1,394,396	1,705,877			
	31	Total liabilities and net assets/fund balances (see instructions)	1,705,877				
Pa	rt III		1,394,396	17,1007071	487		
1		I net assets or fund balances at beginning of year Part II, colum		with	T		
٠			· · · · · · · · · · · · · · · · · · ·		1,394,396		
2					56,318		
3		er increases not included in line 2 (itemize)		3	30,310		
4				4	1,450,714		
5		reases not included in line 2 (itemize)			1,430,714		
6		I net assets or fund balances at end of year (line 4 minus line 5)	Part II column (h) line 3	5	1,450,714		
<u> </u>	iola	The assets of fund balances at end of year (line 4 minus line 5)	raitii, columii (b), line 3	0 6	1,430,/14		

Form 990-PF (2017)

Part IV Capital Gains	and Losses for Tax on Inv	estment Incon	ne		
(a) List and describe	the kind(s) of property sold (for exam	nple, real estate,	(b) How acquired	(c) Date acqui	red (d) Date sold
2-story brick wa	arehouse; or common stock, 200 shs	. MLC Co.)	P Purchase D Donation	(mo., day, yr	
.1a SEE ATTACHMENT		•			
b					
С					
d					
e					
(1) (2)	(f) Depreciation allowed	(g) Cost or	other hasis	(b)	Gain or (loss)
(e) Gross sales price	(or allowable)	plus exper			plus (f) minus (g))
8	(5) 261125)	рас скрої	100 01 0410	((0) F	ndo (i) mindo (g/)
<u>b</u>		· · · · · · · · · · · · · · · · · · ·			
<u>C</u>					
d		 			
<u>e</u>	L	<u> </u>			
Complete only for assets sho	wing gain in column (h) and owned	by the foundation o	on 12/31/69.		(Col. (h) gain minus
(i) FMV as of 12/31/69	(j) Adjusted basis	(k) Excess	` '	• • •	t not less than -0-) or
	as of 12/31/69	over col.	(j), if any	Losse	es (from col. (h))
а					
b					
С					
d					
e				·· -	
	Ги	laa aadan oo Daad I to			
2 Capital gain net income or (n	et capital loss)	lso enter in Part I, li enter -0- in Part I, I	ne /	2	149,510
3 Net short-term capital dain o	r (loss) as defined in sections 1222(5		""c' _		
· -	ie 8, column (c). See instructions. If (
- ·		, ,,	▶		
	U-1 0 4040(-) (- 11 - 1	3	
	<u> Under Section 4940(e) for I</u>				
(For optional use by domestic pri	vate foundations subject to the secti	on 4940(a) tax on n	et investment incoi	me.)	
If section 4940(d)(2) applies, leav	e this part blank.				
	·				
Was the foundation liable for the	section 4942 tax on the distributable	amount of any yea	r in the base period	d?	∐ Yes No
If "Yes," the foundation doesn't q	ualify under section 4940(e). Do not	complete this part.			
1 Enter the appropriate amou	nt in each column for each year, see	the instructions bef	fore making any en	tries.	
(a)	(b)		(c)		(d)
Base period years Calendar year (or tax year beginning	Adjusted qualifying distribution	ns nonch	Net value of paritable-use assets	(co	Distribution ratio il. (b) divided by col. (c))
2016	100	,418	1,325,		0.075747
2015		,541	1,773,	147	0.064598
2014		,723	1,888,		0.054408
2013		,051	1,712,		0.044397
		,466	1,540,		0.047682
2012	, , ,	, 100	1,540,	7 10	0.04/002
• *************************************				_	0 006000
				 	0.286832
	the 5-year base period divide th	•			
of years the foundation has	been in existence if less than 5 years	3		3	0.057366
4 Enter the net value of nonch	antable-use assets for 2017 from Pa	art X, line 5		4	203,358
•					<u> </u>
5 Multiply line 4 by line 3				5	11,666
, ,					
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)			6	1,683
= 1.10. The first investment				· · · · · · · · · · · · · · · · · · ·	1,000
7 Add Isso F and 6				_	12 240
Add lines 5 and 6				7	13,349
					100 0
	from Part XII, line 4				100,064
If line 8 is equal to or greater	r than line 7, check the box in Part V	l, line 1b, and comp	plete that part using	a 1% tax rate.	See the Part VI
instructions.		· · · · · · · · · · · · · · · · · · ·			

Par	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 see it	nstructions)				
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	. You to 154 Aug. 1				
	Date of ruling or determination letter (attach copy of letter if necessary see inst.)					
, b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1,683				
	here ▶ 🔯 and enter 1% of Part I, line 27b					
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	0				
3	Add lines 1 and 2 3	1,683				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; Others,enter -0-) 4	0				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 5	1,683				
6	Credits/Payments	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
а	in the payment are a superposed to 2011 viving and a superposed to 2011 viving and a superposed to 2011 viving a s					
þ	<u> </u>					
C	(1)					
d						
7	Total credits and payments. Add lines 6a through 6d	0				
8	Enter any penalty for underpayment of estimated tax. Check here I if Form 2220 is attached	51				
-9— 	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	1,734				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid					
11 	Enter the amount of line 10 to be. Credited to 2018 estimated tax ▶ Refunded ▶ 11					
	rt VII-A Statements Regarding Activities					
ıa	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				
D	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the					
	definition	[10]				
	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?	A N				
d		1c				
_	(1) On the foundation. ▶ \$ 0 (2) On foundation managers. ▶ \$ 0					
е	<u> </u>					
	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 instrument, articles of					
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3 " x *				
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a X				
b	If "Yes," has it filed a tax return on Form 990-T for this year?					
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. 5 X				
	If "Yes," attach the statement required by General Instruction T.					
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?					
7	Did the foundation have at least \$5,000 in assets at any time during the yr? If "Yes," complete Part II, col. (c), & Part XV	7 X				
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶					
	NONE					
þ	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 X				
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 X				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names					

FDA

Fa	Statements Hegarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	14 By	Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		Х
,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?	13	Х	
	Website address ► N/A			
14	The books are in care of ► SEE ATTACHMENT #5 Telephone no. ►			
	Located at ▶ ZIP+4 ▶			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in fieu of Form 1041 - check here			. ▶ ∐
	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		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	* 3 0	10 Y M	
	the foreign country	<u> </u>	, cç	14 1
Pa	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	Tanua 1		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly)		<i>\$</i> `	3
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	× ×	T	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	% ·		
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	* **	4	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		**	
	(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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	**************************************		128
	foundation agreed to make a grant to or to employ the official for a period after	,	7\$:	**
	termination of government service, if terminating within 90 days)	4 1 3	2,47	**
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in	y 3	E.	. 1
_	Regulations section 53.4941(d)–3 or in a current notice regarding disaster assistance? See instructions	1b	R. í	v
	Organizations relying on a current notice regarding disaster assistance, check here	**** ***	à ac	X.,
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		13	* W ' ' '
	were not corrected before the first day of the tax year beginning in 2017?	1c	**	X
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))		. · · · Š	
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and		7 14	. :
	6e, Part XIII) for tax year(s) beginning before 2017?	160	Ž.	,
	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)	1 A 2 CL		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		111	
	all years listed, answer "No" and attach statement see instructions.)	2b		X
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 <u> </u>		ž,	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	2. 2. 2. 2.		
	at any time during the year?	3.3		
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation		× Šví	
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			3 × 1.1
	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	🐉	*	rada.
	ıf the foundation had excess business holdings in 2017.)	3b		X
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable	13.7	* , *	: 3
	purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	*1	X
FDA	17 990PF5 BWF 990 Form Software Copyright 1996 – 2018 HRB Tax Group, Inc Form	990-	PF (2017)

_	_	-PF (2017) PAUL-DRENNAN FAMILY CHAR	IT 63-0967222				Page 6
Par	t VII	Statements Regarding Ac	tivities for Which	Form 4720 May E	Be Required (continu	ued)	
5a	Duri	ing the year, did the foundation pay or inci	r any amount to			🔌 🐧 Ye	s No
	(1)	Carry on propaganda, or otherwise attern	pt to influence legislation	on (section 4945(e))?	·· ···· 📙 Yes 🔀	No 💮	E 188
	(2)	Influence the outcome of any specific pul	olic election (see section	n 4955), or to carry on,			
		directly or indirectly, any voter registration				No 🗽 🦜	: **** ***
	(3)	•	* '	•	····· 🔲 Yes 🔯	No No	;
	(4)						
		section 4945(d)(4)(A)? See instructions			∐ Yes ⊠	No	*3 \$
	(5)	Provide for any purpose other than religio		•			4.
		purposes, or for the prevention of cruelty				No }	
b		ny answer is "Yes" to 5a(1)-(5), did any of				/_ Kaij *	~ * 4 % ·
		ulations section 53.4945 or in a current no			· ·	/A . 5b	*** 1. 1.5.
		anizations relying on a current notice regar					
С		e answer is "Yes" to question 5a(4), does t		•	у/ъ П., П		}·
		ause it maintained expenditure responsibili	-		··N·/·A· ∐ Yes ∐	No	
e-		'es," attach the statement required by Regi		` '			
6a		the foundation, during the year, receive an a personal benefit contract?			Yes	No S	^
- _b -		the foundation, during the year, pay premi				**********	
D		re roundation, during the year, pay premi res" to 6b, file Form 8870	arns, directly or indirect	ly, on a personal benefit	contractr	65	X X
7 <u>0</u>		any time during the tax year, was the found	ation a party to a probit	uted tay chalter transaction	on? Yes	No.	찍 :
		es," did the foundation receive any procee				. ' } ,	, 🔠 , *
	V				•		
C.I.		and Contractors	o, Directors, Tru	occo, i candation	managers, riiginy	r ala Employ	,,,,
1	List	all officers, directors, trustees, foundat	ion managers and the	ir compensation, see ir	nstructions.		
			(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense acc	count,
		(a) Name and address	hours per week devoted to position	(if not paid, enter -0-)	employee benefit plans and deferred compensation	1	
SEE	A	TTACHMENT #6					
			İ				
	_						
2		npensation of five highest-paid employ	ees (other than those	included on line 1 se	ee instructions). If non	ie, enter	
	"NC	DNE."	_		(d) Contributions to	1	
(a) Nar	me and address of each employee paid	(b) Title, and average	(c) Compensation	employee benefit	(e) Expense acc	count,
		more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred	other allowa	nces
1ON	म		develop to position		compensation	 	
101	ط ا						
					,		
otal	num	ber of other employees paid over \$50,000					0
				······································		F 000 DE	

PAUL-DRENNAN FAMILY CHARIT 63-0967222

Form 990-PF (2017)

PAUL-DRENNAN FAMILY CHARIT 63-0967222 Form 990-PF (2017) Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors (continued) 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 Expenses of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 2 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 2

All other program-related investments. See instructions.

BWF 990

3

Total. Add lines 1 through 3 17 990PF7

Form Software Copyright 1996 – 2018 HRB Tax Group, Inc.

Form **990–PF** (2017)

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign four see instructions.)	ndations,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes	12	
а	Average monthly fair market value of securities	1a	149,762
b	Average of monthly cash balances	1b	56,693
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	206,455
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets		
3	Subtract line 2 from line 1d	3	206,455
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	3,097
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	203,358
6	Minimum investment return. Enter 5% of line 5	6	10,168
Pa	rt 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	10,168
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017 (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	1,683
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	8,485
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	8,485
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	8,485
Pa	Qualifying Distributions (see instructions)		
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	100,064
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		
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	100,064
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	1,683
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	98,381
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the		
	qualifies for the section 4940(e) reduction of tax in those years		

Pa	rt XIII Undistributed Income (se	ee instructions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2017 from Part XI,	Corpus	Years prior to 2016	2016	2017
	line 7		715 × 100	\$ 1.0	8,485
2	Undistributed income, if any, as of the end of 2017			A 33.63	
а	Enter amount for 2016 only			29,122	
b	Total for prior years 20 , 20 , 20	7. J.			75.
3	Excess distributions carryover, if any, to 2017.	1.78	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	24 N.C. V. V.	
а	From 2012				
b	From 2013				
c	From 2014				
d	From 2015				
е	From 2016				
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2017 from Part XII,				
	line 4 ▶ \$ 100,064				
а	Applied to 2016, but not more than line 2a			29,122	
b	Applied to undistributed income of prior years	* 1194		(3. N.) /	
	(Election required see instructions)				
С	Treated as distributions out of corpus		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	(Election required see instructions)				
d	Applied to 2017 distributable amount	3.00.000			36,530
e	Remaining amount distributed out of corpus		n 14 . 17		
5	Excess distributions carryover applied to 2017				***************************************
	(If an amount appears in column (d), the same	226	· · · · · · · · · · · · · · · · · · ·	V2-8-7-8-8-7-	
	amount must be shown in column (a))				
6	Enter the net total of each column as		***,		
	indicated below:		\$		
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	A 24 4 800	\$4.50 A		
b	Prior years' undistributed income. Subtract		7	****	
	line 4b from line 2b				
С	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				
е	Undistributed income for 2016. Subtract			07.2000 42. 3.40 t	
	line 4a from line 2a Taxable amount				
	see instructions				
f	Undistributed income for 2017. Subtract	2.1.1			., ., ., ., ., ., ., ., ., ., ., ., ., .
	lines 4d and 5 from line 1. This amount				120-45
	must be distributed in 2018				(280 45)
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed				
	by section 170(b)(1)(F) or 4942(g)(3) (Elec-				
	tion may be requiredsee 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.	·	Note: 10		The part of the same
а	Excess from 2013				
b	Excess from 2014				
С	Excess from 2015				
d	Excess from 2016				
е	Excess from 2017				

	1990-PF (2017)				·	Page 10
_	t XIV Private Operating Fo					
1a	If the foundation has received a ruling	or determination lett	er that it is a private o	perating		
	foundation, and the ruling is effective for	or 2017, enter the da	ate of the ruling	▶		
′p	Check box to indicate whether the four	dation is a private o	perating foundation	described in section	4942(j)(3) or /	4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(a) Tatal
	income from Part I or the minimum investment return from Part X for each	(a) 2017	(b) 2016	(c) 2015	(d) ,2014	(e) Total
	year listed · · · · · ·		<u> </u>			
b	85% of line 2a					
С	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					
е	Qualifying distributions made directly		 	/		·
_	for active conduct of exempt activities.					
	Subtract line 2d from line 2c · · · · ·					
3	Complete 3a, b, or c for the alternative					
•	test relied upon					
а	"Assets" alternative test enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under		 			
	section 4942(j)(3)(B)(i)					•
b	"Endowment" alternative test enter		 /			
	2/3 of min. investment return shown in					
_	Part X, line 6 for each year listed · · · ·		/			
С	"Support" alternative test enter.	l /	1			
	(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	<u> </u>				<u> </u>
Par	t XV Supplementary Inform			if the foundation	on had \$5,000 (or more in assets
	at any time during the		nstructions.)			
1	Information Regarding Foundation N	•				
а	List any managers of the foundation wh				ceived by the founda	ation before the
	close of any tax year (but only if they ha	ave contributed more	e than \$5,000). (See s	section 507(d)(2).)		
<u>иои</u>						
b	List any managers of the foundation wh				ly large portion of the	e ownership
	of a partnership or other entity) of which	h the foundation has	s a 10% or greater into	erest.		
<u> </u>						
2	Information Regarding Contribution,	Grant, Gift, Loan,	Scholarship, etc., Pr	rograms:		
	Check here ▶ 🛛 if the foundation on					t unsolicited
	requests for funds. If the foundation ma		, to individuals or or	ganizations under oth	ner conditions,	
	complete items 2a, b, c, and d See ins				=	
a	The name, address, and telephone nur	nber or email addres	ss of the person to wi	hom applications sho	uld be addressed.	
					<u>-</u>	
b	The form in which applications should it	be submitted and inf	formation and materia	als they should includ	e.	
C	Any submission deadlines					
d	Any restrictions or limitations on awards	s, such as by geogra	phical areas, charitat	ole fields, kinds of ins	titutions, or other fac	tors

FDA

3 .	Grants and Contributions Paid	During the Teal Of	Approve	a for ruture rayment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient		
	Paid during the year ATTACHMENT #7				
		-			
	Total · · · · · · · · · · · · · · · · · · ·	<u> </u>		▶ 3a	100,
b	Approved for future payment			January July July July July July July July Jul	
	+ + + · · · · · · · · · · · · · · · · ·				

Total · · · · · · · · ·

.....▶ 3b

Form 990-PF (2017)

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income	Exclude	d by section 512, 513, or 514	(e)	
•	(a)	(b)	(c)	(d)	Related or exempt	
	Business	Amount	Excl.	Amount	function income (See instructions.)	
1 Program service revenue	code		code	i	(000 111011 00110110.)	
a	•					
b						
c	-					
d						
e						
f						
g Fees & contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments					-	
4 Dividends and interest from securities			14	18,761		
5 Net rental income or (loss) from real estate	, i	4. 37.15	** ***			
a Debt-financed property	380.5		****	3 300		
b Not debt-financed property						
6-Net rental income or (loss) from personal property .					······································	
7 Other investment income						
8 Gain or (loss) from sales of assets other than inventory		100 0 00	18	149,510		
9 Net income or (loss) from special events .						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue a					· ,	
b						
c						
d						
e						
12 Subtotal. Add columns (b), (d), and (e)	-777 - <u>4</u>		0 %. **	168,271	0	
13 Total. Add line 12, columns (b), (d), and (e)				13	168,271	
See worksheet in line 13 instructions to verify calculat	tions.)					
Part XVI-B Relationship of Activities	to the Ac	complishment of	of Exemp	t Purposes		
Line No. Explain below how each activity for w	-				ntly to the	

Form **990-PF** (2017)

FDA

Form Software Copyright 1996 – 2018 HRB Tax Group, Inc.

		_ * * * • —	D 1 (D 111 11 11 1			00	0 2 0	,	. ugo
Part XVII	Infor	mation F	Regarding T	ransfers to	and Trans	action	s and	Relationship	s With Noncharitable
	Exen	not Orga	nizations					·	

1 1	Did the organization directly or indirectly engage in any of the following with any other organization described in section							Yes	No
501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?									N 3
а	a Transfers from the reporting foundation to a noncharitable exempt organization of								1.
((1) Cash · · · · · · · · · · · · · · · · · · ·						1a(1)	23	X
		her assets · · ·					1a(2)		X
		- · · · · · · · · · · · · · · · · · · ·						*	<u> </u>
	Other transactions						مشد الأنجاب	\b	
(1) Sales of assets to a noncharitable exempt organization						1b(1)		_X
	(2) Purchases of assets from a noncharitable exempt organization						1b(2)		Χ
							1b(3)		X
-	(4) Reimbursement arrangements						1b(4)		X
i		ans or loan guarantee					1b(5)	_	X
	-	=		or fundraising solicitations			 		
,			•	-			1b(6)		X
				other assets, or paid employees			1c		<u>X</u>
				mplete the following schedule. C					
(goods,	other assets, or service	es given by the	reporting foundation. If the found	dation received less th	an fair market value in a	any transa	action	
(or shar	ing arrangement, shov	v in column (d) t	the value of the goods, other asse	ets, or services receive	ed.			
					<u>, </u>				
(2)	1	b)Amount involved	(a) Name of no	asharitable average areasymeter.	(d) D				
(a) Line	no (b)Amount involved	(C) Name of not	ncharitable exempt organization	(a) Description of trans	sfers, transactions, and sha	ing arrange	ements	
	l								
	ŧ								
	- 1								
	ı								
	1								
	- 1								
	- 1								
	- 1								
	1								
22	s the fo	undation directly or in	directly affiliated	with, or related to, one or more	tay_ayampt arganizati	ione described in			
		-	-				П.,		
		501(c) (other than sec		or in section 527?	• • • • • • • • • • • • • • • • • • • •	•••••	Yes		No
b l	f "Yes,'	complete the following	ng schedule						
(a) Name of organization				(b) Type of organization		(c) Description of relationship			
							<u></u>		
	Un	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of							
Sign	be	belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any ki							
	1	May the IRS						his reti	ırn
Here		XDQYCULAL	4 Run	4 /7/18	SECRETARY	TREAS with the pr			
		Signature of officer or	trustee	Date	Title	See instruc	tions.	Yes	No
	•	Print/Type preparer's	s name	Preparer Signature	Date	Check If	PTIN		
Paid		P. Bers M			W		220'	76	
Prepa	arer		2018 self-employed P00432876						
Use (_	Firm's name ► HRI	Firm's EIN ▶ 431871840						
	y	Firm's address ▶ 22	27 LAKES	HORE PKWY STE 16	8	Phone no. (205)	945-9	9440)
FDA	17 9	990PF13 BWF 990 Form Software Copyright 1996 – 2018 HRB Tax Group, Inc.				For	m 990 -	PF (2	2017)