Form 990-PF

Department of the Treasury

Internal Revenue Service

DLN: 93491127015278

OMB No 1545-0052

2017

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.

Open to Public Inspection

1			ndar year 2017, or tax year beginning 01-01-20	17 , aı	nd er	nding 12-31-				
The company of the							entification numbe	er		
## 10 Stock 40 Fig. Fig.						. 64-0616/31				
Commonwealth Comm										
Check type of organization						C If exemption	application is pendir	ng, check here		
Check type of organization Section 501(c)(3) exempt private foundation Eligible from the foundation of year (from 497(a)(1)) nonexempt charitable trust Other (specify) Charitable foundation of year (from 4971)(c)(1)) Other (specify) Charitable for the foundation of year (from 4971)(c)(1)) Other (specify) Charitable for the foundation of year (from 4971)(c)(1)) Other (specify) Charitable for the foundation of year (from 4971)(c)(1)) Other (specify) Charitable for the foundation of amounts a nationism (b) (c) and (q) may not necessarily specify a manufacture of the foundation of amounts an actionism (b) (c) and (q) may not necessarily specific animals in schedule) Other (specify) Charitable foundation of amounts an action of the foundation	G Ch	neck al	Final return Amended return	former public charity		2 Foreign or	ganızatıons meeting	the 85%		
Farr market value of all assets at end of year (from Part II, col (c), line 16 \$ \$ \$ 1,345,439	l Ch	neck ty	pe of organization Section 501(c)(3) exempt private i	oundation						
of year (from Part II, col (c).		Section				-				
of amounts in columns (b), (c), and (g) may not necessarily expenses per books 1	of '	year <i>(f</i>	rom Part II, col (c), \$ 1.545.439		al					
100 100	Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and				(d) Disbursements		
2 Check				expenses per	(Б)			for charitable purposes (cash basis only)		
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 5a Gross rents 5 Net rental income or (loss) 6 Net gain or (loss) from sale of assets not on line 10 5 Gross sales price for all assets on line 6a 387,414 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances 1 b Less Cost of goods sold 1 Gross safe less returns and allowances 1 b Less Cost of goods sold 1 Chre income (attach schedule) 1 Other professional fees (attach schedule) 1 Other professional fees (attach schedule) 1 Taxes (attach schedule) 9 2,500 0 0 1 Other professional fees (attach schedule) 1 Taxes (attach schedule) 9 2,500 0 0 1 Other professional fees (attach schedule) 9 2,500 0 0 1 Other professional fees (attach schedule) 9 2,500 0 0 1 Other professional fees (attach schedule) 9 2,500 0 0 2 Other professional fees (attach schedule) 9 3,500 0 0 2 Other professional fees (attach schedule) 9 3,500 0 0 3 Other expenses (attach schedule) 9 5,600 0 0 3 Other expenses (attach schedule) 9 5,600 0 0 3 Other expenses (attach schedule) 9 5,600 0 0 3 Other expenses (attach schedule) 9 5,600 0 0 3 Other expenses (attach schedule) 9 5,600 0 0 3 Other expenses (attach schedule) 9 5,600 0 0 3 Other expenses (attach schedule) 9 5,600 0 0 3 Other expenses (attach schedule) 9 5,600 0 0 3 Other expenses (attach schedule) 9 5,600 0 0 3 Other expenses (attach schedule) 9 5,600 0 0 3 Other expenses (attach schedule) 9 5,600 0 0 3 Other expenses (attach schedule) 9 5,600 0 0 3 Other expenses (attach schedule) 9 5,600 0 0 3 Other expenses (attach schedule) 9 5,600 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		1		81,027						
100 3 Interest on savings and temporary cash investments 178 1		2	Check ► ☐ If the foundation is not required to attach							
1990 100		3		178		178				
Day 100		4	Dividends and interest from securities	30,989		30,989				
100 Sample Samp		5a	Gross rents							
8 Net short-term capital gain		ь	Net rental income or (loss)							
8 Net short-term capital gain	Revenue	6a	Net gain or (loss) from sale of assets not on line 10	53,457						
8 Net short-term capital gain			•			53,457				
10a Gross sales less returns and allowances Less Cost of goods sold Coross profit or (loss) (attach schedule) Coross profit or (loss) (attach sc		8	Net short-term capital gain							
b Less Cost of goods sold		9	Income modifications							
C Gross profit or (loss) (attach schedule) C C C C C C C C C										
11 Other income (attach schedule) 12 Total. Add lines 1 through 11 163,845 82,818		C								
12 Total. Add lines 1 through 11 163,845 82,818		11		-1,806		-1,806				
14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) 17 Interest 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. 25 Add lines 13 through 23 26 Contributions, gifts, grants paid 27 Subtract line 26 from line 12 28 Excess of revenue over expenses and disbursements 29 Net investment income (if negative, enter -0-) 20 Cattach schedule) (see instructions) 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 28 Excess of revenue over expenses and disbursements 29 Net investment income (if negative, enter -0-) 30 Representation (if negative, enter -0-) 31 Representation (if negative, enter -0-) 32 Representation (if negative, enter -0-) 33 Representation (if negative, enter -0-) 34 Representation (if negative, enter -0-) 35 Representation (if negative, enter -0-) 36 Representation (if negative, enter -0-) 37 Representation (if negative, enter -0-) 38 Representation (if negative, enter -0-) 38 Representation (if negative, enter -0-) 38 Representation (if negative, enter -0-) 39 Representation (if negative, enter -0-) 39 Representation (if negative, enter -0-) 30 Representation (if negative, enter -0-) 31 Representation (if negative, enter -0-) 32 Representation (if negative, enter -0-)			·	163,845		82,818				
15 Pension plans, employee benefits		13	•	0		0		1		
16a Legal fees (attach schedule)		14	Other employee salaries and wages							
26 Total expenses and disbursements. Add lines 24 and 25 0 60,353 0 6 27 Subtract line 26 from line 12	6 2	15	Pension plans, employee benefits							
26 Total expenses and disbursements. Add lines 24 and 25 0 60,353 0 6 27 Subtract line 26 from line 12	SI S	16a	Legal fees (attach schedule)							
26 Total expenses and disbursements. Add lines 24 and 25 0 60,353 0 6 27 Subtract line 26 from line 12	ă.	ь	Accounting fees (attach schedule)	2,500		0		2,50		
26 Total expenses and disbursements. Add lines 24 and 25 0 60,353 0 6 27 Subtract line 26 from line 12	e F	С	Other professional fees (attach schedule)							
26 Total expenses and disbursements. Add lines 24 and 25 0 60,353 0 6 27 Subtract line 26 from line 12	a C		Interest							
26 Total expenses and disbursements. Add lines 24 and 25 0 60,353 0 6 27 Subtract line 26 from line 12	<u> </u>		, , , , , , , , , , , , , , , , , , , ,							
26 Total expenses and disbursements. Add lines 24 and 25 0 60,353 0 6 27 Subtract line 26 from line 12	Ξ									
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26 Total expenses and disbursements. Add lines 24 and 25 0 60,353 0 6 27 Subtract line 26 from line 12	ב									
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26 Total expenses and disbursements. Add lines 24 and 25 0 60,353 0 6 27 Subtract line 26 from line 12	= =									
26 Total expenses and disbursements. Add lines 24 and 25 0 60,353 0 6 27 Subtract line 26 from line 12	06		· •	2,661		0		2,66		
25 60,353 0 66 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income(if negative, enter -0-)	ō	25	Contributions, gifts, grants paid	57,692				57,69		
27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income(if negative, enter -0-)		26	·	60,353		0		60,35		
disbursements b Net investment income (if negative, enter -0-) c Adjusted net income(if negative, enter -0-)		27	Subtract line 26 from line 12	-						
c Adjusted net income(if negative, enter -0-)		a	disbursements	103,492						
			·			82,818				
For Panerwork Reduction Act Notice, see instructions.			Adjusted net income(If negative, enter -0-)					rm 990-PF (2017		

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22

23

24

25

26

27

28

29 30

31

Part III

2

3

4

Net Assets or Fund Balances

Other liabilities (describe ▶_

Unrestricted

Temporarily restricted

Permanently restricted .

and complete lines 27 through 31.

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

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize) ▶

	2	Savings and temporary cash investments		45,728		24,505	24,505
	3	Accounts receivable ▶					
		Less allowance for doubtful accounts ▶					
	4	Pledges receivable ▶					
		Less allowance for doubtful accounts ▶					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see instructions)					
	7	Other notes and loans receivable (attach schedule)					
		Less allowance for doubtful accounts ▶					
S.	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)		1,015,104	<u></u>	1,070,952	1,359,006
	С	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)					
	14	Land, buildings, and equipment basis ▶					
		Less accumulated depreciation (attach schedule)					
	15	Other assets (describe >)	% J	80,381	<u>}</u>	78,575	78,575
	16	Total assets (to be completed by all filers—see the					
		instructions Also, see page 1, item I)		1,153,893		1,257,385	1,545,439
	17	Accounts payable and accrued expenses					
	18	Grants payable					
es	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
ap	21	Mortgages and other notes payable (attach schedule)					
ニ		Other believes (describe	—				

1,153,893

1,153,893

1,153,893

0

1,257,385

1,257,385 1,257,385

2

3 4

5

6

1,153,893

1,257,385

1,257,385 Form **990-PF** (2017)

Total liabilities(add lines 17 through 22)

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Capital stock, trust principal, or current funds

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

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

Analysis of Changes in Net Assets or Fund Balances

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

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

Page **3**

LaSee Additional Data Table Cot or other basis Gain or (loss)	Part IV Capital Gains	and Losses for Tax on Invest	tment Income			
Cost or other basis Gain (loss)	2-story brick war	the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		How acquired P—Purchase	Date acquired	
c d d e (e) (f) (g) (g) (h) (G) (g) (h) (G) (g) (h) (G) (g) (h) (G) (g) (g) (h) (G) (g	1aSee Additional Data Tabl	e				
Cross sales price	b					
e (e) Gross sales price Depreciation allowed (or allowable) Cost or other basis (e) plus (f) minus (g) a See Additional Data Table b c d d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (f) Adjusted basis Excess of col (i) Cost or other basis (e) plus (f) minus (g) (g) FM V as of 12/31/69 (g) Adjusted basis Excess of col (i) Cost or other basis (ii) Gains (Col (h) gain minus col (k), but not less than -0-) or Lossee (from col (h)) a See Additional Data Table b c d 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 if (gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 10 if years (loss) as defined in sections 12/22(s) and (6) if gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 10 if years (loss) as defined in 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 For optional use by domestic private foundations subject to the section 4940(e) to reduce the part of the section 4940(e) for Reduced Tax on Net Investment Income For optional use by domestic private foundations subject to the section 4940(e) to reduce the part of the section 4940(e) to reduce the part of the section 4940(e) to reduce the part of the part of the section 4940(e) to reduce the part of the part of the section 4940(e) to reduce the part of the part of the section 4940(e) to reduce the part of the part of the section 4940(e) to reduce the part of the part of the section 4940(e) to reduce the part of the	С					
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Gross sales price (or allowable) Cost or other basis (e) plus (f) minus (g) a See Additional Data Table Correct or	е					
b	Gross sales price	Depreciation allowed (or allowable)	Cost or	other basis	Gain c	r (loss)
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Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) (i) (i) (ii) (iii) (k) (k) (k) (iii) (k) (iii) (k) (iii) (i	d					
Canna (Col (in) gain minus Col (in) gain	e					
Adjusted basis as of 12/31/69 as of 12/31/69 over col (j), if any col (k), but not less than -0-) or a See Additional Data Table b b c 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 if (loss), enter -0- in Part I, line 8, solumn (c) (see instructions) If (loss), enter -0- in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 7 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 7 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 7 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 7 if gain, also enter in Part I, line 7 if gain, also enter in Part I, line 7 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 7 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 7 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 7 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, line 8 if gain, also enter in Part I, lin	Complete only for assets	s showing gain in column (h) and ow	ned by the foundation	on 12/31/69	(1)
b c c d d d d d d d d d d d d d d d d d		Adjusted basis		s of col (ı)	col (k), but not	less than -0-) or
C d d	a See Additional Data Tabl	e				
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Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income	С					
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 If (loss), enter -0- in Part I, line 7 If gain, also enter in Part I, line 8 If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 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? 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) Adjusted qualifying distributions (b) Adjusted qualifying distributions (c) Net value of noncharitable-use assets (a) (b) (col (b) divided by col (c)) 2016 (b) divided by col (c) (col (b) divided by col (c) (col (b) divided by col (c)) 2013 46,528 2013 2014 52,923 1,252,585 0,042251 2013 46,528 1,023,993 0,047251 2 Total of line 1, column (d) 2 0,0236255 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 4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 5 64,672 6 Enter 190 of net investment income (1% of Part I, line 27b) 6 Enter qualifying distributions from Part XII, line 4 1 Fine 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 1 Instructions	d					
2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 2 53,4! 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 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	e					
(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? 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) 2016 62,845 61,816 1,209,857 0014 2015 61,816 1,300,439 0047535 2014 52,923 1,252,585 0042251 2013 46,528 1,023,993 0045438 2012 46,508 947,453 0049087 2 Total of line 1, column (d) 1	If gain, also enter in Pa	rt I, line 8, column (c) (see instructi	ons) If (loss), enter -0)- · · · · · }		53,457
(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? 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) 2016 62,845 61,816 1,209,857 0 051944 2015 61,816 1,300,439 0 047535 2014 52,923 1,252,585 0 042251 2013 46,528 1,023,993 0 045438 2012 46,508 947,453 0 049087 2 Total of line 1, column (d)	Part V Qualification I	Jnder Section 4940(e) for Re	educed Tax on Net	Investment Ir	ncome	
### 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?						
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part Canal C	i i	·	ecion 15 to(a) cax on in	et investment inte	·	
(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 62,845 1,209,857 0 051944 2015 61,816 1,300,439 0 047535 2014 52,923 1,252,585 0 042251 2013 46,528 1,023,993 0 045438 2012 46,508 947,453 0 049087 2 Total of line 1, column (d) 2 0 236255 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 047251 4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 4 1,368,691 5 Multiply line 4 by line 3 5 64,672 6 Enter 1% of net investment income (1% of Part I, line 27b) 5 64,672 7 Add lines 5 and 6 5 7 65,500 8 Enter qualifying distributions from Part XII, line 4 8 60,353 1 filine 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	If "Yes," the foundation does no	ot qualify under section 4940(e) Do	not complete this part	<u>. </u>		es 🗹 No
Base period years Calendar year (or tax year beginning in)		nount in each column for each year,	see instructions before	e making any entri		
2015 61,816 1,300,439 0 047535 2014 52,923 1,252,585 0 042251 2013 46,528 1,023,993 0 045438 2012 46,508 947,453 0 049087 2 Total of line 1, column (d)	Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharital		Distribution rat	ol (c))
2014 52,923 1,252,585 0 042251 2013 46,528 1,023,993 0 045438 2012 46,508 947,453 0 049087 2 Total of line 1, column (d)						
2013 46,528 1,023,993 0 045438 2012 46,508 947,453 0 049087 2 Total of line 1, column (d)				' ' ' 		
2012 46,508 947,453 0 049087 2 Total of line 1, column (d)						
2 Total of line 1, column (d)						
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		· · · · · · · · · · · · · · · · · · ·		· ·	T	
number of years the foundation has been in existence if less than 5 years	,	•				0 236255
6 Enter 1% of net investment income (1% of Part I, line 27b)	number of years the four	ndation has been in existence if less	than 5 years	<u>3</u>		
7 Add lines 5 and 6	5 Multiply line 4 by line 3			5		64,672
8 Enter qualifying distributions from Part XII, line 4 ,	6 Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		828
8 Enter qualifying distributions from Part XII, line 4 ,	7 Add lines 5 and 6			7		65,500
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				8		60,353
E 000 BE /00		eater than line 7, check the box in Pa	art VI, line 1b, and con	nplete that part us		e the Part VI

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

7b

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

4 List all afficers directors tweets	6	d-ti		/ in at at in	
List all officers, directors, truste (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
JAMES P GRAEBER JR		STEE	0	0	0
240 WESTOVER DRIVE	0 00				
CLARKSDALE, MS 38614	TDU	CTEE	0		
ETHEL G GIBBES 144 COPPERHEAD ROAD ST MATTHEWS, SC 29135	0 00	STEE	0	0	0
WILLIAM M GRAEBER	TRU:	STEE	0	0	0
P O BOX 40 MARKS, MS 38646	0 00		-		
2 Compensation of five highest-pa	id er	nployees (other than t	nose included on line 1	-see instructions). If no	ne, enter "NONE."
(a) Name and address of each employee p more than \$50,000	aıd	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
NONE					
		-			
			<u> </u>		
		_			
Total number of other employees paid ov	er ¢F	50 000		-	0
3 Five highest-paid independent c		·			
(a) Name and address of each perso				e of service	(c) Compensation
NONE		,			
			1		
			1		
			4		
Total number of others receiving over \$5					0
Part IX-A Summary of Direct List the foundation's four largest direct charitable			ida ralauant statistical inform	astion such as the number of	
organizations and other beneficiaries served, cor	nferen	ces convened, research paper	s produced, etc	lation such as the number of	Expenses
1 NONE					0
2					
3					
4					
	_		,		
		elated Investments			
Describe the two largest program-related inv	estme	ents made by the foundation d	uring the tax year on lines 1	and 2	Amount
1					
2					
All other program-related investments	See	instructions			
3 %					0
Total. Add lines 1 through 3 .					C

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

2

3a 3h

4

5

60.353

60.353

Form 990-PF (2017)

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

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

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

2

3

4

5

2,661

64,118

Form **990-PF** (2017)

0

(d)

2017

Page 9

Part XIII

b Total for prior years

a From 2012. **b** From 2013. . . . c From 2014. . . d From 2015. e From 2016.

PF	(20)1	7)	
11	1		ī	In	,

-PF (2	017)		
1111	Undistributed Income	(see instructions)	

1 Distributable amount for 2017 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2017

a Enter amount for 2016 only.

Excess distributions carryover, if any, to 2017

f Total of lines 3a through e. 4 Qualifying distributions for 2017 from Part XII, line 4 🕨 \$ 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

5 Excess distributions carryover applied to 2017

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must

(If an amount appears in column (d), the

6 Enter the net total of each column as

be distributed in 2018 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

9 Excess distributions carryover to 2018.

10 Analysis of line 9

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

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

indicated below:

d Applied to 2017 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a))

(a)

Corpus

0

0

(b)

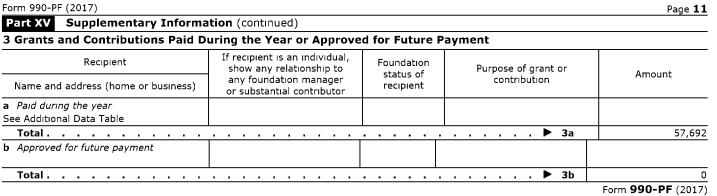
Years prior to 2016

(c)

2016

57,692

57,692



Form 990-PF (2017)					Page 1 2
Part XVI-A Analysis of Income-Producing	Activities		1		
Enter gross amounts unless otherwise indicated	1	usiness income	· ·	n 512, 513, or 514	(e) Related or exempt function income
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(See instructions)
a b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments			14	178	
Dividends and interest from securities Net rental income or (loss) from real estate			14	30,989	
a Debt-financed property.					
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			18	53,457	
9 Net income or (loss) from special events			10	33,437	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a PARTNERSHIP INCOME(LOSS) b			14	-1,806	
C					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		C		82,818	
13 Total. Add line 12, columns (b), (d), and (e)			1	.3	82,818
(See worksheet in line 13 instructions to verify calcular Part XVI-B Relationship of Activities to the		nment of Exem	pt Purposes		
Line No. Explain below how each activity for which the accomplishment of the foundation's explain instructions (instructions)	income is report	ed in column (e) o	f Part XVI-A contrib	uted importantly to n purposes) (See	
instructions)					
				Fo	rm 990-PF (2017)

Part 2	XVII	Exempt Organi		ransters to a	and Transactio	ons and Relation	onsnips with Nonch	aritable		
			directly enga				on described in section 5	501	Yes	No
a Tran	sfers fr	om the reporting foun	dation to a n	oncharitable ex	empt organization	n of	-			
	Cash.							1a(1)		No
(2)	Other	assets						1a(2)		No
b Othe	r trans	actions								
(1)	Sales	of assets to a nonchar	ıtable exemp	t organization.				1b(1)		No
(2)	Purcha	ses of assets from a r	noncharitable	exempt organi	zation			. 1b(2)		No
(3)	Rental	of facilities, equipmen	nt, or other a	ssets				. 1b(3)		No
(4)	Reımb	ursement arrangemen	its					1b(4)		No
(5)	Loans	or loan guarantees.						1b(5)		No
(6)	Perforn	nance of services or m	embership or	r fundraising so	licitations			1b(6)		No
c Shar	ing of t	acılıtıes, equipment, r	nailing lists, (other assets, or	paid employees.			1c		No
							lways show the fair mark			
							ed less than fair market ets, or services received	value		
III ai	iy cians	saction of snaring arra	ngement, sin	ow iii colaiiiii (t	a) the value of the	e goods, other ass	ets, or services received			
(a) Line	No	(b) Amount involved	(c) Name of	noncharitable exe	mpt organization	(d) Description o	f transfers, transactions, and	l sharıng arra	ngemen	ıts
		dation directly or indire	•	•	•			_	_	
desc	ribed in	n section 501(c) of the	Code (other	than section 50	$\mathfrak{I}(c)(3)$ or in sec	tion 527?		. ∐Yes	✓	No
b If "Y	es," co	mplete the following s	chedule							
		(a) Name of organization	n	(b) Type of organizat	ion	(c) Description of r	elationship		
	Unde	r nenalties of neriury	I declare tha	t I have examir	ed this return in	-luding accompany	ring schedules and stater	ments and	to the	hest
							r than taxpayer) is based			
	which	preparer has any kno	wledge							
Sign	*	****			2018-04-29	*****		lay the IRS di	scuss th	115
Here	\ _				2010 04 23			eturn iith the prepa	rer shov	vn
	,	ignature of officer or t	rustee		Date	Title		elow	_	_
	,	ignature or officer or t	dice		Date	Title	(:	see instr)? [✓ Yes	□ _{No}
'		Print/Type preparer's	name	Preparer's Sigi	nature	Date	PTIN	.1		
			· . ranne	cpuici a bigi		Date	Check if self-			
		1555 D TAB/ (5D					employed ▶ 🔲	P01360)959	
Paid		JEFF R TARVER								
Prepa	arer	Firm's name ► TAR	/ED TADVED	 KIRBY & JACKS	ON					
Use C		minis name 🚩 TAR	VER TARVER	עזעםן מ ארעט	OIV		Firm	n's EIN ▶64	-03258	183
•		Firm's address ▶ 40	5 WASHING	TON AVENUE						
		-)	4C 207012617			Pho	ne no (662) 378-8	8113
		GF	KEENVILLE, M	4S 387013617				- (, `	

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation GS TACTICAL TILT 8738 37 Р 2015-12-31 2017-01-31 ISHARES CURRENCY HEDGED 1350 000 Ρ 2015-03-17 2017-01-31 VANGUARD FTSE DEV MKTS 900 000 Р 2015-12-31 2017-01-31 MORGAN STANLEY LNKD TO MSCI EAFE 10000 000 Р 2015-09-01 2017-05-12 WELLS FARGO & CO S&P 500 INDEX 10000 000 Ρ 2016-04-19 2017-05-24 Ρ GS HI YIELD FD 2565 760 2010-04-01 2017-05-30 Р SOCIETE GENERALE SPDR S&P REGIONAL BANK 10000 000 2015-08-12 2017-08-17 Р SOCIETE GENERALE TECH SELETE 10000 000 2015-08-12 2017-08-24 Ρ 2015-09-15 J P MORGAN CHASE RUSSELL 2000, 50000 000 2017-09-20 Р 2017-01-09 GS U S EQUITY DIV & PREM FD 4651 160 2017-09-11 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 85.811 84,500 1,311 35,858 37,719 -1,861 33,560 33,282 278 11,445 10,000 1,445 10,664 10,000 664 312 19,000 18,688 11,505 10,000 1,505 11,365 10,000 1,365 5,000 6,283 1,283 60,000 55,103 4,897 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (i) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 1,311 -1,861 278 1,445 664 312 1,505 1,365 1,283 4,897

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation Р SOCIETE GENERALE EURO STOXX 19000 000 2015-09-29 2017-10-04 J P MORGAN CHASE MSCI EAFE 18000 000 Р 2015-12-01 2017-11-06 CHEVRON TEXACO 125 000 Р 2003-03-05 2017-12-06 Р MORGAN STANLEY SPDR S&P BANK 10000 00 2016-03-15 2017-12-20 Ρ WELLS FARGO & CO S&P 500 10000 000 2016-01-22 2017-12-28 E I DUPONT - CASH-IN-LIEU Ρ 2014-03-24 2017-10-01 GS U S EQUITY - LTCG Ρ 2016-01-01 2017-12-11 Р GS U S EQUITY - STCG 2017-01-01 2017-12-11 Capital Gains Dividends Р Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) (f) 24,315 19,000 5,315 21,935 18,000 3,935 15,104 2,665 12,439 12,900 10,000 2,900 12,200 10,000 2,200 14 14 1,688 1,688 379 379 13,388 13,388 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (i) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 5,315 3,935 12,439 2,900 2,200 14 1,688 379 13,388

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient	30,10,2400.		
a Paid during the year					
AFRICAN BIBLE COLLEGE 5343 CLINTON BLVD JACKSON, MS 39209	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	250	
BETHANY CHRISTIAN SERVICES 2624 SOUTHERLAND STREET JACKSON, MS 39216	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	500	
BIBLICAL COUNSELING & TRAINING MISSIONS 441 NORTHPARK DRIVE RIDGELAND, MS 39157	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	1,000	
BOYS SCOUTS OF AMERICA 1325 W WALNUT HILL LANE IRVING, TX 75015	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	250	
BUILDING EXCELLENT SCHOOLS 31 MILK ST FL 6 BOSTON, MA 02109	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	500	

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Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CAMPUS CRUSADE FOR CHRIST N/A PUBLIC SUPPORT OF CHARITABLE 250 P O BOX 628222 **OPERATIONS** ORLANDO, FL 32862 CANOPY CHILDREN'S HOME N/A PUBLIC SUPPORT OF CHARITABLE 500

P O BOX 1078 JACKSON, MS 39215			OPERATIONS	
CARE STATIONP O BOX 1041 CLARKSDALE, MS 38614	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	1,000
CARES - FRIENDS OF THE SHELTER 990 E F HALE DRIVE	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	500

CLARKSDALE, MS 38614	N/A	POBLIC	OPERATIONS	1,000
CARES - FRIENDS OF THE SHELTER 990 E F HALE DRIVE SENATOBIA, MS 38668	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	500
CARING BRIDGEP O BOX 6032	N/A	PUBLIC	SUPPORT OF CHARITABLE	150

CARES - FRIENDS OF THE SHELTER 990 E F HALE DRIVE SENATOBIA, MS 38668	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	
CARING BRIDGEP O BOX 6032	N/A	PUBLIC	SUPPORT OF CHARITABLE	

CARES - FRIENDS OF THE SHELTER 990 E F HALE DRIVE SENATOBIA, MS 38668	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	5
CARING BRIDGEP O BOX 6032 ALBERT LEA, MN 56007	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	1

Total. 57,692

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

<u> </u>				
COMMUNITY FOUNDATION 525 E CAPITOL STREET JACKSON, MS 39201	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	500
DELTA ACADEMY MOTHERSP O BOX 70 MARKS, MS 38646	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	250

MARKS, MS 38646	INA	POBLIC	OPERATIONS	230
DIXON GALLERY4339 PARK AVENUE MEMPHIS, TN 38117	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	100
FELLOWSHIP METHODIST CHURCH CEMETARY TN 99	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	250

MEMPHIS, TN 38117		TOBLIC	OPERATIONS	100
FELLOWSHIP METHODIST CHURCH CEMETARY TN 99 MURFREESBORO, TN 37128	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	250
EIDST MADES CEMETADY	N/A	DUBLIC	SUDDODT OF CHADITABLE	2 500

CEMETARY TN 99 MURFREESBORO, TN 37128	IN/A	POBLIC	OPERATIONS	250
FIRST MARKS CEMETARY SEVENTH STREET	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	2,500

MURFREESBORO, TN 37128			
FIRST MARKS CEMETARY SEVENTH STREET MARKS, MS 38646	N/A	SUPPORT OF CHARITABLE OPERATIONS	2,500

*				i
FIRST MARKS CEMETARY SEVENTH STREET MARKS, MS 38646	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	
Total				57,692

3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FRENCH CAMP ACADEMY1 FINE PLACE N/A PUBLIC SUPPORT OF CHARITABLE 1,500

FRENCH CAMP, MS 39745			OPERATIONS	
FRIENDS OF THE MUSEUM UNIV OF MS UNIVERSITY AVENUE OXFORD, MS 38655	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	
GRAHAM CARSON MEMORIAL	N/A	PUBLIC	SUPPORT OF CHARITABLE	·

DIOT ADTO INCOZO CUNELOWED AVE		DI IDI TO	CURRENT OF CUARTERIE	
RAHAM CARSON MEMORIAL CHOLARSHIP FUND 11 LOCUST ST IARKS, MS 38646	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	
AT OND, 145 30033				

SCHOLARSHIP FUND 511 LOCUST ST MARKS, MS 38646		OPERATIONS	
GRIOT ARTS INC278 SUNFLOWER AVE CLARKSDALE, MS 38614	N/A	 SUPPORT OF CHARITABLE OPERATIONS	250

750

1,000

MARKS, MS 30040				
GRIOT ARTS INC278 SUNFLOWER AVE CLARKSDALE, MS 38614	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	250
HERITAGE FOUNDATION	N/A	PUBLIC	SUPPORT OF CHARITABLE	250

GRIOT ARTS INC278 SUNFLOWER AVE CLARKSDALE, MS 38614	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	
HERITAGE FOUNDATION 214 MASSACHUSETTS AVE	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	

CLARRSDALE, MS 30014			OPERATIONS	
HERITAGE FOUNDATION 214 MASSACHUSETTS AVE WASHINGTON, DC 20002	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	250

WASHINGTON, DC 20002	OPERATIONS	
Total	 	57,692

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year JOAN & WM KING SELF MEMORIAL N/A PUBLIC SUPPORT OF CHARITABLE 500 511 LOCUST ST OPERATIONS MARKS, MS 38646 N/A PUBLIC 1,500 LEBONHEUR CHILDRENS HOSPITAL SUPPORT OF CHARITABLE 848 ADAMS AVENUE OPERATIONS

MEMPHIS, TN 38103			OI ERATIONS	
LULA RICH EDUCATIONAL FOUNDATION 415 LEE DRIVE CLARKSDALE, MS 38614	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONSSUPPORT OF CHARITABLE OPERATIONS	2,000
MAKE A WISH FOUNDATION 4742 N 24TH STREET PHOENIX, AZ 85016	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	250
MARKS PRESBYTERIAN CHURCH	N/A	PUBLIC	SUPPORT OF CHARITABLE	14,392

OPERATIONS

57,692

511 LOCUST ST

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MARKS, MS 38646 Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MARKS- QUITMAN COUNTY LIBRARY N/A PUBLIC SUPPORT OF CHARITABLE 500 315 MAIN STREET OPERATIONS MARKS, MS 38646 N/A PUBLIC 1,000 MD ANDERSON CANCER CENTER SUPPORT OF CHARITABLE 1515 HOLCOMBE AVE **OPERATIONS** 500

HOUSTON, IX 7/030				
METHODIST CHILDREN'S HOME 805 N FLAG CHAPEL ROAD JACKSON, MS 39209	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	5
METHODIST ELOWEDS MANOR	N/A	DUBLIC	SLIDDORT OF CHARITARIE	2.0

JACKSON, MS 39209			OPERATIONS	
METHODIST FLOWERS MANOR 1251 LEE DRIVE CLARKSDALE, MS 38614	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	2,000

П	METHODIST FLOWERS MANOR 1251 LEE DRIVE CLARKSDALE, MS 38614	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	2,000
	METROPOLITAN MUSEUM OF ART	N/A	PUBLIC	SUPPORT OF CHARITABLE	150

1251 LEE DRIVE CLARKSDALE, MS 38614		, obeic	OPERATIONS	2,000
METROPOLITAN MUSEUM OF ART 1000 5TH AVENUE	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	150

57,692

CLARKSDALE, MS 38614			OPERATIONS	
METROPOLITAN MUSEUM OF ART 1000 5TH AVENUE	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	

CLARKSDALE, MS 30014				
METROPOLITAN MUSEUM OF ART 1000 5TH AVENUE NEW YORK, NY 10028	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	

Total .

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Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MS FOUNDATION OF PUBLIC N/A PUBLIC SUPPORT OF CHARITABLE 150 BROADCASTING OPERATIONS 3825 RIDGEWOOD ROAD JACKSON, MS 39211 MS MUSEUM OF ART380 S LAMAR ST N/A PUBLIC. SUPPORT OF CHARITABLE 2,000 JACKSON, MS 39201 **OPERATIONS** NATURE CONSERVATORY N/A PUBLIC SUPPORT OF CHARITABLE 1,500 4245 FAIRFAX DRIVE **OPERATIONS** ARLINGTON, VA 22203 PALMER HOME FOR CHILDREN N/A PUBLIC SUPPORT OF CHARITABLE 650 422 MS 12 **OPERATIONS**

PUBLIC

SUPPORT OF CHARITABLE

OPERATIONS

500

57,692

PARALYZED VETS

801 FIGHTEENTH STREET

3a

N/A

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

QUITMAN COUNTY EDUCATIONAL SYSTEM 310 PECAN STREET MARKS, MS 38646	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	6,500
REFORMED THEOLOGICAL SEMINARY	N/Δ	PUBLIC	SUPPORT OF CHARITARI F	500

REFORMED THEOLOGICAL SEMINARY 5422 CLINTON BLVD JACKSON, MS 39209	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	500
SPRING INITIATIVE INCP O BOX 1759 CLARKSDALE, MS 38614	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	250

SPRING INITIATIVE INCP O BOX 1759 CLARKSDALE, MS 38614	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	250
ST JUDES CHILDRENS RESEARCH 262 DANNY THOMAS PLACE	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	2,500

′				
ST JUDES CHILDRENS RESEARCH 262 DANNY THOMAS PLACE MEMPHIS, TN 38105	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	2,500
TEACH FOR AMERICA25 BROADWAY	N/A	PUBLIC	SUPPORT OF CHARITABLE	4,500

ST JUDES CHILDRENS RESEARCH 262 DANNY THOMAS PLACE MEMPHIS, TN 38105	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	2,5
TEACH FOR AMERICA25 BROADWAY NEW YORK, NY 10004	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	4,5

3a

262 DANNY THOMAS PLACE MEMPHIS, TN 38105			OPERATIONS	_,
TEACH FOR AMERICA25 BROADWAY NEW YORK, NY 10004	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	4,500
Total				57,692

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year THE SALVATION ARMY N/A PUBLIC. SUPPORT OF CHARITABLE 1,000 2649 W OXFORD LOOP **OPERATIONS** OXFORD, MS 38655 UNIVERSITY OF MS - FORD CENTER FOR | N/A 750 PUBLIC SUPPORT OF CHARITABLE PERFORMING ARTS **OPERATIONS** P O BOX 1848 UNIVERSITY, MS 38677 UNIVERSITY OF MS - ROBERT KHAYAT N/A **PUBLIC** SUPPORT OF CHARITABLE 250 **SCHOLARSHIP OPERATIONS** P O BOY 1848 1,000

UNIVERSITY, MS 38677				
UNIVERSITY OF MS MUSEUM P O BOX 1041 UNIVERSITY, MS 38677	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	1,
WICHO DUBLIC TELEVICION	NI/A	DUDLIC	CURRORT OF CHARITARIE	

UNIVERSITY, MS 38677			OT EIGHTONS	
WKNO PUBLIC TELEVISION 7151 CHERRY FARMS ROAD CORDOVA. TN 38016	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	100

57,692 Total . 3a

Foundation Recipient If recipient is an individual, Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

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

or substantial contributor

Name and address (home or business)

3а

	or substantial contributor			1
a Paid during the year				
WOUNDED WARRIOR PROJECT	N/A	PUBLIC	SUPPORT OF CHARITABLE	500

JACKSONVILLE, FL 32256

Total. 57,692

efile GRAPHIC print - DO NOT	PROCESS	As Filed D	ata -	D	LN: 93491127015278
TY 2017 Accounting F	ees Sch	edule			_
Name: YOUNGER FOUNDATION					
EIN: 64-0616731					
Accounting Fees Schedule		,			
Category	Am	ount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING & TAX PREP FEES		2,500	0		2,500

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -			DI	N: 9349112701	5278
TY 2017 All Other Program Re	lated Invest	ments Sch	edule			
Name:	YOUNGER FOL	NDATION				
	64-0616731	115/11011				
	Category				Amount	
NONE						0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491127015278							
TY 2017 Investments Corporate Stock Schedule									
11 2017 Intestments Corporat	11 2017 Investments corporate Stock Schedule								
Name: \	OUNGER FOUND	ATION							

EIN: 64-0616731		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
GOLDMAN SACHS SECURITIES	1,070,952	1,359,006

Name: YOUNGER FOUNDATION **EIN:** 64-0616731

PARTNERSHIP INVESTMENT - ENTERPRISE PROD

Other Assets Schedule						
Description	Beginning of Year - Book Value	End of Year - Book Value				
CRECHE	70,899	70,899				

9,482

End of Year - Fair

Market Value

DLN: 93491127015278

7,676

70,899

7,676

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491127015278	
TY 2017 Other Expenses Sche	dule			_	
Name: YOUNGER FOUNDATION					
EIN: 64-0616731					
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
BANK FEES	161	0		161	

efile GRAPHIC print - DO NOT PROCESS

Name: YOUNGER FOUNDATION

As Filed Data -

EIN:	64-0616731	

EIN:	64-0616731	

ETIA:	04-0010/31	

And	Net Investment	I

Other Income Schedule Description

PARTNERSHIP INCOME(LOSS)

Revenue A **Expenses Per Books**

-1.806

Income

-1,806

Adjusted Net Income

-1.806

DLN: 93491127015278

efile GRAPHIC print - D	O NOT PROCESS	As Filed Data -				DLN: 93491127015278
Schedule B		Schedu	ule of Contributo	rs		OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Information a	bout Schedule B (F	Form 990, 990-EZ, or 990 Form 990, 990-EZ, or 990-P <u>ww <i>Irs gov/form</i>990</u>		ons is at	2017
Name of the organization	on				Employer id	dentification number
Organization type (che	ck one)				64-0616731	
	ŕ					
Filers of:	Section:					
Form 990 or 990-EZ	☐ 501(c)() (enter number) o	rganization			
	☐ 4947(a)(´	1) nonexempt char	ritable trust not treated a	s a private founda	tion	
	☐ 527 politi	cal organization				
Form 990-PF	✓ 501(c)(3)	exempt private fo	undation			
	☐ 4947(a)(²	1) nonexempt char	ritable trust treated as a p	orivate foundation		
	☐ 501(c)(3)	taxable private for	undation			
			PF that received, during to omplete Parts I and II S			
Special Rules						
under sections 5 received from an	09(a)(1) and 170(b)	(1)(A)(vı), that che uring the year, tota	g Form 990 or 990-EZ th cked Schedule A (Form al contributions of the gre plete Parts I and II	990 or 990-EZ), P	art II, line 13,	, 16a, or 16b, and that
during the year, t	total contributions of	f more than \$1,000	or (10) filing Form 990 o Dexclusively for religious animals Complete Part	, charitable, scien		
during the year, of If this box is check purpose Don't co	contributions <i>exclus</i> cked, enter here the omplete any of the p	ively for religious, total contributions parts unless the G e	or (10) filing Form 990 of charitable, etc., purposes that were received during eneral Rule applies to the or more during the year	s, but no such cor ng the year for an us organization be	ntributions tota exclusively re ecause it rece	aled more than \$1,000 eligious, charitable, etc , ived <i>nonexclusively</i>
990-EZ, or 990-PF), but	ıt must answer "No	on Part IV, line 2	le and/or the Special Ru , of its Form 990, or chec t it doesn't meet the filing	ck the box on line	H of its	
For Paperwork Reduction A for Form 990, 990-EZ, or 990		ructions	Cat No 30613X	Sched	ıle B (Form 990	0, 990-EZ, or 990-PF) (2017)

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