05 Form 990-PF
Department of the Treasury

EXTENDED TO NOVEMBER 15, 2018 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**Open to Public Inspection

For	calei	idar year 2017 or tax year	r beginning			, and ending		
Na	me o	foundation					A Employer identification	number
Τ	HE	BEN AND MAR	RY FRANCES	DC	SKOCIL			
_ F	RI	VATE FOUNDAT	rion				75-2715940)
Nur	mber a	and street (or P O box number	If mail is not delivered to	street a	ddress)	Room/suite	B Telephone number	-
4	40	8 BARNETT BI	LVD				817-784-67	142
Cit	y or t	own, state or province, coi	untry, and ZIP or fore	ign po	stal code		C If exemption application is p	pending, check here
A	RL	INGTON, TX	76017-582	9				
G (Check	all that apply	Initial return		Initial return of a fo	rmer public charity	D 1 Foreign organization	s, check here
			Final return		Amended return			
			Address change		Name change		2 Foreign organizations months the check here and attach or	eeting the 85% test, omputation
H_ (Check	type of organization:	X Section 501(c)((3) exe	mpt private foundation	() D	E If private foundation sta	itus was terminated
L	Se	ction 4947(a)(1) nonexem	npt charitable trust	0	ther taxable private founda	ation \(\frac{1}{2}\)	under section 507(b)(1	
I Fa	air ma	arket value of all assets at o	end of year J Acco	ounting	g method: X Cash	Accrual	F If the foundation is in a	60-month termination
(f	rom F	Part II, col. (c), line 16)		Oth	er (specify)		under section 507(b)(1	
_	\$	964	41024 . (Part I, c	columr	n (d) must be on cash bası	s)		
Pa	art I	Analysis of Revenue an (The total of amounts in colu	nd Expenses	not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		necessarily equal the amoun	nts in column (a))	ioi	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, gran	ts, etc , received	L	<u>985791.</u>		N/A	
	2		on is not required to attach Sch	В				
	3	Interest on savings and tempo cash investments	orary		14664.	14664.		STATEMENT 1
	4	Dividends and interest fro	om securities		88094.	88094.		STATEMENT 2
	5a	Gross rents						
	b	Net rental income or (loss)		Γ				
40	6a	Net gain or (loss) from sale of	assets not on line 10		1120170.			
evenue	b	Gross sales price for all assets on line 6a	3542485					
ě	7	Capital gain net income (from	Part IV, line 2)	_		1120170.		
	8	Net short-term capital gai	ın					
\mathfrak{D}	9	Income modifications						
2 2	10a	Gross sales less returns and allowances						
SCAPPIO	Ι.	Less Cost of goods sold						
П	l	Gross profit or (loss)						
-	11	Other income			1125.	1125.		STATEMENT 3
=	12	Total Add lines 1 throug	h 11		2209844.	1224053.		
	13	Compensation of officers, dire	ectors, trustees, etc		0.	-0		0.
4	14	Other employee salaries a					RECEIVED	
	15	Pension plans, employee	•				VED	
ses.	16a	Legal fees				[2]	MAYOO	
ë		Accounting fees	STMT 4	. 「	7950.	5300.	MAY 2 9 2018	2650.
Š		Other professional fees	STMT 5		37304.	24869.		2 12435.
ě		Interest			<u> </u>		OGDEN, UT	
Operating and Administrative Expenses		Taxes	STMT 6		268.	268.		0.
Istr	19	Depreciation and depletio				200.		<u> </u>
nin	20	Occupancy		F				
Adr	21	Travel, conferences, and	meetings					
þ	22	Printing and publications	-			.		
g	23	Other expenses	STMT 7	·	1079.	1079.		0.
Ē	l	Total operating and adm			±010•	<u> </u>		<u> </u>
era		expenses Add lines 13 ti			46601.	31516.		15085.
Q	25	Contributions, gifts, grant	•	H	292500.	21210.		292500.
	l	Total expenses and disb		H	272700.			4,2,000
	20	Add lines 24 and 25	uracincilla		339101.	31516.		307585.
	27	Subtract line 26 from line	12.	-+		21210.		307303.
					1870743.			
	l .	Excess of revenue over expen		-	TO101#3*	1192537.		
		Net investment income (if no Adjusted net income (if no		-		11363310	N/A	
		valastea net income (it be	egative, enter -U-)				74/17	L

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Pai	Halance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
r ai	Column should be for end-of year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 Cash - non-interest-bearing		2222	
	2 Savings and temporary cash investments	244941.	229272.	229272.
	3 Accounts receivable ►			
	Less' allowance for doubtful accounts ▶			
'	Pledges receivable ►			
	Less allowance for doubtful accounts >			
!	Grants receivable			
'	Receivables due from officers, directors, trustees, and other			
	disqualified persons			
	7 Other notes and loans receivable			
	Less, allowance for doubtful accounts ▶			
7	Inventories for sale or use			
Ass	Prepaid expenses and deferred charges			
` ¹')a Investments - U.S. and state government obligations	2700776	4702671	C20C20C
	b Investments - corporate stock STMT 8	2780776.	4782671.	6296396.
	c Investments - corporate bonds STMT 9	164724.	45713.	51049.
'	Investments - land, buildings and equipment basis			
4	Less accumulated depreciation 2 Investments - mortgage loans			
13	4.	4107332.	4110860.	3064307.
1		410/332.	4110000.	3004307.
'	Less accumulated depreciation			
1				
- 1	Total assets (to be completed by all filers - see the			
'	instructions. Also, see page 1, item I)	7297773.	9168516.	9641024.
1	7 Accounts payable and accrued expenses	, 23 , , , 3 ,	<u> </u>	70110211
18				
를 20				
Liabilities 5				
ے ا	2 Other liabilities (describe >			
2	3 Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26, and lines 30 and 31			
8 2	↓ Unrestricted	7297773.	9168516.	
<u> </u>	5 Temporarily restricted	_		
<u>6</u> 20	6 Permanently restricted			
Net Assets or Fund Balance	Foundations that do not follow SFAS 117, check here			
드	and complete lines 27 through 31			
<u>ي</u> 2	Capital stock, trust principal, or current funds			
9 2				
ž 29	Retained earnings, accumulated income, endowment, or other funds			
Ž 3	Total net assets or fund balances	7297773.	9168516.	
ŀ			04.6054.6	
3	Total liabilities and net assets/fund balances	7297773.	9168516.	<u> </u>
Par	t III Analysis of Changes in Net Assets or Fund Ba	lances		
1 To	tal net assets or fund balances at beginning of year - Part II, column (a), line 3	0		
	ust agree with end-of-year figure reported on prior year's return)		1	7297773.
•	ter amount from Part I, line 27a		2	1870743.
	ner increases not included in line 2 (itemize)		3	0.
	d lines 1, 2, and 3		4	9168516.
	creases not included in line 2 (itemize)		5	0.
	tal net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 30	6	9168516.
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Part IV Capital Gains and Losses for Tax on Investment Income

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			if property sold (for exai common stock, 200 shs		ite,	P -	Purchase Donation		te acquired , day, yr)	(d) Date sold (mo , day, yr.)
1a MERRILL LYNCH LTCG-SEE SCHEDULE				P			-			
_	MERRILL LYNCH						P			
_	MERRILL LYNCH			-			P			
	MERRILL LYNCH						P	_		
-										
	(e) Gross sales price		preciation allowed or allowable)		st or other basis expense of sale				Gain or (loss lus (f) minus (
	1132387.	,								1132387.
b	64444									61141.
_	-5621.									-5621.
d	-67737.									-67737.
_6	,									
	Complete only for assets show	ing gain in col	umn (h) and owned by	the foundation	on 12/31/69.				(Col (h) gain	
	(i) FMV as of 12/31/69		Adjusted basis s of 12/31/69		cess of col. (1) col. (j), if any		C		t not less that es (from col (
_a	1									1132387.
_t	·									61141.
)									<u>-5621.</u>
d	<u> </u>									-67737 .
_6	<u> </u>								 .	
2	Capital gain net income or (net c	apıtal loss)	If gain, also enter If (loss), enter -0-	ın Part I, line ın Part I, line	7 7	}	2			1120170.
3	Net short-term capital gain or (lo	ss) as defined	d in sections 1222(5) an	d (6):						
	If gain, also enter in Part I, line 8 If (loss), enter -0- in Part I, line 8	, column (c).	` '	· /-		}	2		N/A	
F			ction 4940(e) for	Reduced	Tax on Net	Inve	stment In	come	14/12	ı
_	or optional use by domestic privat									
٧.	or optional add by admiddle prival	io roundamone	oudjour to the doublen	10 10(4) 14/101	· · · · · · · · · · · · · · · · · · ·	•••••	,			
lf s	section 4940(d)(2) applies, leave t	this part blank	.							
W	as the foundation liable for the sec	ction 4942 tax	on the distributable am	ount of any vi	ear in the base per	od?				Yes X No
	Yes," the foundation doesn't qual			, ,	•					
1	Enter the appropriate amount in	each column	for each year; see the ir	structions be	fore making any ei	ntries.				<u>.</u>
	(a) Base period years Calendar year (or tax year beginn	ing in)	(b) Adjusted qualifying dist	tributions	Net value of no	(c) nchari	table-use asset	s	Distrib (col. (b) div	(d) oution ratio rided by col. (c))
_	2016		2	92584.			687901	3.		.042533
	2015			75359.			799046			.059491
	2014			59153.			883358	9.		.040658
	2013			92917.			850390			.046204
	2012		2	84847.			666658			.042728
2	Total of line 1, column (d)							2		.231614
3	Average distribution ratio for the	5-year base p	period - divide the total o	on line 2 by 5	O, or by the numbe	er of ye	ears			
	the foundation has been in existe	ence if less tha	an 5 years					3		.046323
4	Enter the net value of noncharita	ble-use assets	s for 2017 from Part X,	line 5				4		8123843.
5	Multiply line 4 by line 3							5		376321.
6	Enter 1% of net investment inco	me (1% of Pa	rt I, line 27b)					6		11925.
7	Add lines 5 and 6							7		388246.
_	Fator availé :: del l'	m Dant VIII I	. 4							207505
8	Enter qualifying distributions fro			46 - 1			4	8	1	307585.
	If line 8 is equal to or greater tha See the Part VI instructions	in line 7, checi	k uie dox in Part VI, line	ib, and comp	nete that part usin	y a 1%	ax rate.			

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Part VI Excise Tax Based on Investment Income (Section	_	r 4948 - see	instru	ıctio	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here 🕨	and enter "N/A" on line 1				
Date of ruling or determination letter (attach copy of let					
b Domestic foundations that meet the section 4940(e) requirements in Part V, check	here ▶ and enter 1%	1		<u>238</u>	<u>51.</u>
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	s only; others, enter -0-)	2			0.
3 Add lines 1 and 2		3		238	<u>51.</u>
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundation	s 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		238	<u>51.</u>
6 Credits/Payments:					
a 2017 estimated tax payments and 2016 overpayment credited to 2017	6a 728	1.			
b Exempt foreign organizations - tax withheld at source		0.			
c Tax paid with application for extension of time to file (Form 8868)		0.			
d Backup withholding erroneously withheld	6d	0.			
7 Total credits and payments. Add lines 6a through 6d		7		_72	81.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 222	20 is attached	8			0.
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	I	9		165	70.
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount over	erpaid	10			
11 Enter the amount of line 10 to be Credited to 2018 estimated tax	Refunded	▶ 11			
Part VII-A Statements Regarding Activities					
1a During the tax year, did the foundation attempt to influence any national, state, or lo	ocal legislation or did it participate or interv	rene in		Yes	No
any political campaign?			1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for politic	al purposes? See the instructions for the o	definition	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and					
distributed by the foundation in connection with the activities					
c Did the foundation file Form 1120-POL for this year?			1c		x
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed d	uring the year.				
(1) On the foundation. \blacktriangleright \$ 0 . (2) On foundation m		0.		1	
e Enter the reimbursement (if any) paid by the foundation during the year for political		<u> </u>			
managers. ► \$ 0.	, , , , , , , , , , , , , , , , , , ,				
2 Has the foundation engaged in any activities that have not previously been reported	to the IBS?		2		X
If "Yes," attach a detailed description of the activities.			-		
3 Has the foundation made any changes, not previously reported to the IRS, in its go	verning instrument, articles of incornorate	nn or			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the chan		511, 01	3		x
4a Did the foundation have unrelated business gross income of \$1,000 or more during	·		4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	g 1110 your	N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during t	the year?	21,722	5		X
If "Yes," attach the statement required by General Instruction T	ine year?		-		
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) sa	attefied either				
By language in the governing instrument, or	tusnou ottnor.				
 By state legislation that effectively amends the governing instrument so that no n 	pandatory directions that conflict with the	etato law		l	
remain in the governing instrument?	naridatory directions that committee with the	state law	6		х
	is " complete Part II, col. (c), and Part VV		7	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Ye	ss, complete Part II, col. (c), and Part XV		<u> </u>		
On Fater the atotac to which the foundation reports as with which it is reported to	notwestians.		ŀ		
8a Enter the states to which the foundation reports or with which it is registered. See i	iistructions. 🚩		-		1
TX	The Alba Attaches Comments of the American		-		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF	το the Attorney General (or designate)		٠		
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 mean		calendar	_		177
year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Y			9		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attack	a schedule listing their names and addresses		10	L	X

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Part VII-A Statements Regarding Activities (continued)

			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
•	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
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 ▶ NANCY BROWN Telephone no. ▶ (817)	784	-67	42
	Located at ► 4408 BARNETT BLVD, ARLINGTON, TX ZIP+4 ► 76			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		>	
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		<u>X</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
Pa	art 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	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(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) 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 foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	•		
	before the first day of the tax year beginning in 2017?	1c		<u>X</u>
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)):			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2017?			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	Delta (a. data a baldara a bara 200/ data bara data data bara a b			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No			
	• •	}		
D	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,	٠,		
	Form 4720, to determine if the foundation had excess business holdings in 2017.) N/A	3b		37
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		_X_
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	,		v
	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		<u> </u>

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5a During the year, did the foundation pay or incur any amount to:	OIIII 4720 Way be i	nequired (contin	uea)		es No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e)\2		es X No	-	00 110
(2) Influence the outcome of any specific public election (see section 4955), or	• • •		23 (24) (10		
any voter registration drive?	in to during on, amounty or main		es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?		es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					
4945(d)(4)(A)? See instructions	11 dog 11	☐ Y	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or				
the prevention of cruelty to children or animals?	т. т		es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described				
section 53.4945 or in a current notice regarding disaster assistance? See instr			N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta	iined			
expenditure responsibility for the grant?	Ŋ	1/A 🔲 Ye	es 🔲 No		
if "Yes," attach the statement required by Regulations section 53.4945-5(d)					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			-	
a personal benefit contract?		Ye	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Y6	es 🗶 No		
b If "Yes," did the foundation receive any proceeds or have any net income attribution			N/A	7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	anagers, Highly	y		
List all officers, directors, trustees, and foundation managers and t	hour componenties			-	
List all officers, directors, trustees, and foundation managers and t	,	(c) Compensation	(d) Contributions to	10	Fynansa
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	acci) Expense ount, other lowances
BENJAMIN L DOSKOCIL SR	PRES&TREASURE	E R			
P.O. BOX 180277					
ARLINGTON, TX 76096	0.00	0.	0.		0.
EDWARD JOSEPH DOSKOCIL	VICE-PRES				
P.O. BOX 180277					
ARLINGTON, TX 76096	0.00	0.	0.		0.
	SECRETARY			,	
P.O. BOX 180277					
ARLINGTON, TX 76096	0.00	0.	0.	<u>. </u>	0.
O Commenced in a fitting bijehood modern began fallen dhoo in	luded on line 4). If none	ontor INONE II			
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter NONE.	(d) Contributions to	[e]	Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	acco	Expense ount, other lowances
NONE					
<u> </u>					
					
				+	
	-				
# . I	L	L .			0
Total number of other employees paid over \$50,000					1.1

THE BEN AND MARY FRANCES DOSKOCIL

Form 990-PF\(2017) PRIVATE FOUNDATION 75-2715940 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) Part VIII 3 Five highest-paid independent contractors for professional services. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (c) Compensation (b) Type of service NONE 0 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 Expenses number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. N/A Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 N/A All other program-related investments. See instructions.

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Total. Add lines 1 through 3

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Part X Minimum Investment Return (All domestic foundations	must complete this part. Foreign four	ndations, se	e instructions)
1 Fair market value of assets not used (or held for use) directly in carrying out charita	ble, etc., purposes.		
a Average monthly fair market value of securities		1a	8055342.
b Average of monthly cash balances		1b	192214.
c Fair market value of all other assets		1c	
d Total (add lines 1a, b, and c)		1d	8247556.
e Reduction claimed for blockage or other factors reported on lines 1a and			
1c (attach detailed explanation)	1e 0.		
2 Acquisition indebtedness applicable to line 1 assets		2	0.
3 Subtract line 2 from line 1d		3	8247556.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amounts)	nt, see instructions)	4	123713.
5 Net value of noncharitable-use assets Subtract line 4 from line 3 Enter here and	on Part V, line 4	5	8123843.
6 Minimum investment return. Enter 5% of line 5		6	406192.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) foreign organizations, check here ▶ ☐ and do not complete this pai		d certain	
1 Minimum investment return from Part X, line 6		1	406192.
2a Tax on investment income for 2017 from Part VI, line 5	23851.		
b Income tax for 2017. (This does not include the tax from Part VI.)	2b		
c Add lines 2a and 2b		2c	23851.
3 Distributable amount before adjustments Subtract line 2c from line 1		3	382341.
4 Recoveries of amounts treated as qualifying distributions		4	0.
5 Add lines 3 and 4		5	382341.
6 Deduction from distributable amount (see instructions)		6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Pa	rt XIII, line 1	7	382341.
Part XII Qualifying Distributions (see instructions) 1 Amounts paid (including administrative expenses) to accomplish charitable, etc., page 1.			
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., pt a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	n poses.	1a	307585.
b Program-related investments - total from Part IX-B		1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charit	ahla ato nurnosas	2	
3 Amounts set aside for specific charitable projects that satisfy the:	αιοίς, στο., ματροσέο	-	· · · · · · · · · · · · · · · · · · ·
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	307585.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net in		-	3073331
income Enter 1% of Part I, line 27b		5	0.
6 Adjusted qualifying distributions Subtract line 5 from line 4		6	307585.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years	when calculating whether the foundation of		•
4940(e) reduction of tax in those years.	<u> </u>		

Form **990-PF** (2017)

Form 990-PF'(2017)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI,				
line 7				382341.
2 Undistributed income, if any, as of the end of 2017				3023121
a Enter amount for 2016 only			158862.	
b Total for prior years				
		0.		
3 Excess distributions carryover, if any, to 2017:				
a From 2012				
b From 2013				
c From 2014				
d From 2015				
e From 2016				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2017 from				
Part XII, line 4. ► \$ 307585.				
a Applied to 2016, but not more than line 2a			158862.	
b Applied to undistributed income of prior			130002.	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount	•			148723.
e Remaining amount distributed out of corpus	0.			140/23.
5 Excess distributions carryover applied to 2017	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2016. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				233618.
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)	0.			
8 Excess distributions carryover from 2012				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2018		•		
Subtract lines 7 and 8 from line 6a	0.			
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				

THE BEN AND MARY FRANCES DOSKOCIL

Part XIV Private Operating F	oundations (see in:		I-A. question 9)	N/A	.5940 Page 1
1 a If the foundation has received a ruling of	-		, , , , , , , , , , , , , , , , , , , ,	IV/ FA	
foundation, and the ruling is effective for					
b Check box to indicate whether the found	*	•	in section	4942(j)(3) or 494	2(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	10 12(1)(0) 01	2(1)(0)
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for	(-)		(-)	" /	
each year listed	-	-			
b 85% of line 2a					
c Qualifying distributions from Part XII,				1	
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities			/		
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying	/				
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					-
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:	/				
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					***
(4) Gross'investment income					
Part XV Supplementary Info			if the foundation	had \$5,000 or moi	re in assets
at any time during t	he year-see instr	ructions.)			<u>.</u>
1 Information Regarding Foundatio	n Managers:				
a List any managers of the foundation wh			tributions received by the	foundation before the close	of any tax
year (but only if they have contributed m	iore than \$5,000). (See s	ection 507(d)(2).)			
SEE STATEMENT 11					
b List any managers of the foundation who			(or an equally large portion	on of the ownership of a par	tnership or
other entity) of which the foundation has	s a 10% or greater interes	st.			
NONE		 			
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pi	rograms:		
Check here 🕨 🗶 if the foundation o	nly makes contributions	to preselected charitable	organizations and does r	not accept unsolicited reque	sts for funds. If
the foundation makes gifts, grants, etc.,	to individuals or organiza	ations under other condit	ions, complete items 2a,	b, c, and d.	
a The name, address, and telephone num	ber or email address of th	ne person to whom applic	cations should be addres	sed	
•					
b The form in which applications should b	e submitted and informati	tion and materials they s	hould include:		
.,		-, -, -, -, -, -, -, -, -, -, -, -, -, -			
c Any submission deadlines:					
-					

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

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Part XV Supplementary Information	 			
3 Grants and Contributions Paid During the		Payment		
Recipient Name and address (home as hypothesis)	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		
a Paid during the year				
BOYS AND GIRLS CLUB	N/A	PUBLIC CHARITY	REC CENTER	
508 N ELM STREET	N/A	TOBBIC CIBRITI	REC. CENTER	
ARLINGTON TX 76011		İ		12500
				12300
73.773 WTOV GOVEON				
CASSATA HIGH SCHOOL	N/A	CATHOLIC SCHOOL	GENERAL USE	
1400 HEMPHILL ST				10000
FORT WORTH, TX 76104				10000
CATHOLIC CHARITIES FORT WORTH	N/A	PUBLIC CHARITY	FIESTA/ENDOWMENT	
249 N THORNHILL DR				
FORT WORTH, TX 76112				100000
CATHOLIC EXTENSION SERVICE	N/A	PUBLIC CHARITY	GENERAL USE	
150 SOUTH WACKER DR				
CHICAGO, IL 60606				10000
DAMUOT TO MURE DAME THE BARR	7 / 3	PUBLIC CHARITY		
CATHOLIC NEAR EAST WELFARE ASSOCIATION	N/A	PUBLIC CHARITY	GENERAL USE	
1011 FIRST AVE				
NEW YORK NY 10022-4195				10000
	ONTINUATION SHEE	TT(S)	▶ 3a	292500
b Approved for future payment				
NONE				

Unrelated business income

Enter gross amounts unless otherwise indicated

(e)

Excluded by section 512, 513, or 514

Part XVI-A **Analysis of Income-Producing Activities**

1 Program	n service revenue	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
•						-
)	-			
· —						
a Fees	s and contracts from government agencies					··
	rship dues and assessments					
	on savings and temporary cash			 		
investm				1		14664.
	ds and interest from securities			·		88094.
	tal income or (loss) from real estate					
	t-financed property			ļ		
	debt-financed property					
	tal income or (loss) from personal					
propert		•				
	y ivestment income			 		1125.
						1125.
	(loss) from sales of assets other					1120170
than inv						1120170.
	ome or (loss) from special events					
	rofit or (loss) from sales of inventory					
1 Other re						
		_				
		1 1				
c						
				L		
d	· · · · · · · · · · · · · · · · · · ·					
e						1004053
e 2 Subtota	ıl. Add columns (b), (d), and (e)		0.		0,	1224053.
e2 Subtota 3 Total A	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)		0.		0.	
e	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Theet in line 13 instructions to verify calculations.)				13	
e 2 Subtota 3 Total A See works Part X	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 13 instructions to verify calculations.) WI-B Relationship of Activities Explain below how each activity for which in	s to the Accom	nplishment of Ex	(emp	13 t Purposes	1224053.
e2 Subtota 3 Total A See works Part X Line No	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculations.) VI-B Relationship of Activities Explain below how each activity for which into the foundation's exempt purposes (other that	s to the Accom	nplishment of Ex	(emp	13 t Purposes	1224053.
e2 Subtota 3 Total A See works Part X Line No	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 13 instructions to verify calculations.) WI-B Relationship of Activities Explain below how each activity for which in	s to the Accom	nplishment of Ex	(emp	13 t Purposes	1224053.
e2 Subtota 3 Total A See works Part X Line No	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculations.) VI-B Relationship of Activities Explain below how each activity for which into the foundation's exempt purposes (other that	s to the Accom	nplishment of Ex	(emp	13 t Purposes	1224053.
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e2 Subtota 3 Total A See works Part X Line No	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculations.) VI-B Relationship of Activities Explain below how each activity for which into the foundation's exempt purposes (other that	s to the Accom	nplishment of Ex	(emp	13 t Purposes	1224053.
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e2 Subtota 3 Total A See works Part X Line No	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculations.) VI-B Relationship of Activities Explain below how each activity for which into the foundation's exempt purposes (other that	s to the Accom	nplishment of Ex	(emp	13 t Purposes	1224053.
e 2 Subtota 3 Total A See works Part X Line No	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculations.) VI-B Relationship of Activities Explain below how each activity for which into the foundation's exempt purposes (other that	s to the Accom	nplishment of Ex	(emp	13 t Purposes	1224053.
e 2 Subtota 3 Total A See works Part X Line No	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculations.) VI-B Relationship of Activities Explain below how each activity for which into the foundation's exempt purposes (other that	s to the Accom	nplishment of Ex	(emp	13 t Purposes	1224053.
e 2 Subtota 3 Total A See works Part X Line No	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculations.) VI-B Relationship of Activities Explain below how each activity for which into the foundation's exempt purposes (other that	s to the Accom	nplishment of Ex	(emp	13 t Purposes	1224053.
e2 Subtota 3 Total A See works Part X Line No	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculations.) VI-B Relationship of Activities Explain below how each activity for which into the foundation's exempt purposes (other that	s to the Accom	nplishment of Ex	(emp	13 t Purposes	1224053.
e 2 Subtota 3 Total A See works Part X Line No	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculations.) VI-B Relationship of Activities Explain below how each activity for which into the foundation's exempt purposes (other that	s to the Accom	nplishment of Ex	(emp	13 t Purposes	1224053.
e 2 Subtota 3 Total A See works Part X Line No	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculations.) VI-B Relationship of Activities Explain below how each activity for which into the foundation's exempt purposes (other that	s to the Accom	nplishment of Ex	(emp	13 t Purposes	1224053.
e 2 Subtota 3 Total A See works Part X Line No	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculations.) VI-B Relationship of Activities Explain below how each activity for which into the foundation's exempt purposes (other that	s to the Accom	nplishment of Ex	(emp	13 t Purposes	1224053.
e 2 Subtota 3 Total A See works Part X Line No	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculations.) VI-B Relationship of Activities Explain below how each activity for which into the foundation's exempt purposes (other that	s to the Accom	nplishment of Ex	(emp	13 t Purposes	1224053.
e 2 Subtota 3 Total A See works Part X Line No	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculations.) VI-B Relationship of Activities Explain below how each activity for which into the foundation's exempt purposes (other that	s to the Accom	nplishment of Ex	(emp	13 t Purposes	1224053.
e 2 Subtota 3 Total A See works Part X Line No	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculations.) VI-B Relationship of Activities Explain below how each activity for which into the foundation's exempt purposes (other that	s to the Accom	nplishment of Ex	(emp	13 t Purposes	1224053.
e 2 Subtota 3 Total A See works Part X Line No	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculations.) VI-B Relationship of Activities Explain below how each activity for which into the foundation's exempt purposes (other that	s to the Accom	nplishment of Ex	(emp	13 t Purposes	1224053.
e 2 Subtota 3 Total A See works Part X Line No	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculations.) VI-B Relationship of Activities Explain below how each activity for which into the foundation's exempt purposes (other that	s to the Accom	nplishment of Ex	(emp	13 t Purposes	1224053.
e2 Subtota 3 Total A See works Part X Line No	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculations.) VI-B Relationship of Activities Explain below how each activity for which into the foundation's exempt purposes (other that	s to the Accom	nplishment of Ex	(emp	13 t Purposes	1224053.

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

		<u>-</u>						
1	Did the or	ganization directly or indir	rectly engage in any of the folk	owing with any other organization	described in section 501(c)		Yes	No
	(other tha	n section 501(c)(3) organ	nzations) or in section 527, rel	ating to political organizations?				
а	Transfers	from the reporting founda	ation to a noncharitable exemp	t organization of				
	(1) Cash					1a(1)		X
	(2) Other	assets				1a(2)		X
b	Other tran	sactions:						
	(1) Sales	of assets to a noncharitat	ble exempt organization			1b(1)		X
	(2) Purch	nases of assets from a nor	ncharitable exempt organizatio	on		1b(2)		X
	(3) Renta	al of facilities, equipment, o	or other assets			1b(3)		<u>X</u>
	(4) Reimi	bursement arrangements				1b(4)		X
	(5) Loans	s or loan guarantees				1b(5)		Х
	(6) Perfo	rmance of services or mer	mbership or fundraising solici	tations		1b(6)		X
C			iling lists, other assets, or paid			1c		X X
d	If the answ	wer to any of the above is '	"Yes," complete the following s	schedule. Column (b) should alwa	ays show the fair market value of the good	ls, other ass	ets,	
	or service	s given by the reporting fo	oundation. If the foundation re	ceived less than fair market value	in any transaction or sharing arrangemen	it, show in		
			other assets, or services receiv					
a) L	ine no	(b) Amount involved	(c) Name of nonchari	table exempt organization	(d) Description of transfers, transactions, a	ind sharing ar	rangeme	ents
			N/.	A				
_								
								
		<u> </u>						
_								
	1- 4b - 4		 		<u> </u>			
2 a		•		one or more tax-exempt organiza	itions described		37	No
			n 501(c)(3)) or in section 527	,		Yes	LA	_1 MO
b	If "Yes," co	omplete the following sche	· · · · · · · · · · · · · · · · · · ·	(b) Type of organization	(a) Decembran of relation	nohio.		
		(a) Name of orga	lamzadon	(b) Type of organization	(c) Description of relation	изпр		
_	-	N/A						
		- · · · · · · · · · · · · · · · · · · ·						
	- 1		7					
٠.						May the IRS		
Sig	gn 🛌	1) a. de/	as Man Volu	1/-1/10	.	return with th shown below		
пе	re	LUVIU	WIGHT M	2 LA-18	President	X Yes		J No∮
	Sign	nature of officer or trustee		- Date /	Title			
		Print/Type preparer's nai	$\langle \nu \tau \rangle$	e signature	Ate Check If PTI	N		
_		R BARRY JO		and the same	self- employed			
Pa -		CPA				00095		
	eparer	Firm's name ► R .	BARRY JOHNSON	& COMPANY, P.C	Firm's EIN ► 75-	23056	55	
Us	e Only							
		Firm's address ▶ 15	04 W ABRAM ST					
			LINGTON, TX 7	6013	Phone no. 817 -	277-7	614	
						Form 99 0		

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

2017

THE BEN AND MARY FRANCES DOSKOCIL PRIVATE FOUNDATION 75-2715940 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990 EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization
THE BEN AND MARY FRANCES DOSKOCIL
PRIVATE FOUNDATION

Employer identification number

75-2715940

Part I	Contributors (see instructions) Use duplicate copies of Part I if	additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	BENJAMIN L & MARY F DOSKOCIL 4408 BARNETT BLVD ARLINGTON, TX 76017-5829	\$\$ \$	Person Payroll Noncash X (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)

Name of organization

THE BEN AND MARY FRANCES DOSKOCIL

Employer identification number

PRIVATE FOUNDATION

75-2715940

Part II	Noncash Property (see instructions) Use duplicate copies of Pa	rt II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	5000 SHARES FACEBOOK, INC.		
		\$\$	06/06/17
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	4800 SHARES ADOBE SYSTEMS, INC.		
		\$\$	06/06/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	300 SHARES AMAZON.COM, INC.	_	
		\$533004.	06/06/17
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	1200 SHARES EQUINIX, INC. (REIT)		
		\$302663.	06/06/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
			. <u>-</u>

Name of organization

Employer identification number

	EN AND MARY FRANCES DOS	KOCIL							
	E FOUNDATION	Shouthana ta anna ataiste e " de ce ste	4 (- 1 - 14 - 1647 - 17)	75-2715940					
Part III	Exclusively religious, charitable, etc., contr the year from any one contributor. Complete c completing Part III, enter the total of exclusively religious	olumns (a) through (e) and the foll	lowing line entry. For organization	าร					
	Use duplicate copies of Part III if additiona	al space is needed	or less for the year tentor through	· · · · · · · · · · · · · · · · · · ·					
(a) No. from	(h) Dumana at art	(-) - - - - - - - -	(1) 5						
Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held					
				<u> </u>					
-									
		(e) Transfer of g	uft						
-	Transferee's name, address, an	d ZIP + 4	Relationship of tra	nsferor to transferee					
(a) No.	<u>.</u>	1	- · ·						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held					
raiti	-								
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	(e) Transfer of gift								
		(0) 114110101 01 9							
	Transferee's name, address, an	d ZIP + 4	Relationship of tra	nsferor to transferee					
	, , , , , , , , , , , , , , , , , , , ,		riolation p or a a						
(a) No. from	(h) Duwn and of set	(a) 11a a -# -:##	(-1) D						
Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held					
	(e) Transfer of gift								
	Transferee's name, address, an	d ZIP + 4	Relationship of tra	nsferor to transferee					
									
				· . · · ·					
(a) No.			· I ·						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held					
Parti									
									
	(a) Transfer of sitt								
	(e) Transfer of gift								
	Transferee's name, address, an	Relationship of tra	nsferor to transferee						
-	iransiciee s name, address, an	V-II T T	riciationality of tra	.ioio. or to during elec					

PRIVATE FOUNDATION

Part XV Supplementary Information

Part XV Supplementary Information	·			
3 Grants and Contributions Paid During the				
Recipient Name and address (home as husanes)	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		
ODOGG CARRIOT TO COMPANY				
CROSS CATHOLIC OUTREACH	N/A	PUBLIC CHARITY	GENERAL USE	
2700 N MILITARY TRAIL STE 240 BOCA RATON, FL 33427		1		15000.
50011 1d11011, 11 53421				13000.
DIOCESE OF FORT WORTH ADVANCEMENT	N/A	PUBLIC CHARITY	SEMINARIANS	
FOUNDATION SEMINARY FUND				
800 LOOP 820 SOUTH				
FORT WORTH, TX 76108				10000.
DISCALCED CARMELITE NUNS	N/A	PUBLIC CHARITY	GENERAL USE	
5801 MT CARMEL DR ARLINGTON, TX 76017				5000
ARDINGTON, IX 70017		-		5000.
B O OB W O OF YERVINA	7/3			
E.O. OF H.S. OF JERUSALEM 2001 KIRBY DR #902	N/A	PUBLIC CHARITY	SHRINE	
HOUSTON, TX 77019				5000.
E.O. OF H.S. OF JERUSALEM	N/A	PUBLIC CHARITY	GENERAL USE	
2001 KIRBY DR #902	.,,			
HOUSTON, TX 77019				25000.
FOOD FOR THE POOR	N/A	PUBLIC CHARITY	GENERAL USE	
6401 LYONS RD				
COCONUT CREEK, FL 33073				10000.
FRANCISCAN FOUNDATION FOR THE HOLY	N/A	PUBLIC CHARITY	GENERAL USE	
LANDS	.,,			
P.O. BOX 29086				
WASHINGTON, DC 20017			_	20000,
HEIFER FOUNDATION	N/A	PUBLIC CHARITY	THE ARK	
1 WORLD AVENUE				5000
LITTLE ROCK, AR 72202				5000.
PAPAL FOUNDATION	N/A	PUBLIC CHARITY	GENERAL USE	
150 MONUMENT RD STE 609 BALA CYNWYD, PA 19004				20000.
PONTIFICAL NORTH AMERICAN COLLEGE	N/A	CATHOLIC SCHOOL	GENERAL USE	
3211 FOURTH ST NE	[
WASHINGTON, DC 20017				15000.
Total from continuation sheets				150000.

PRIVATE FOUNDATION

75-2715940

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager or substantial contributor Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient SISTER OF ST MARY OF NAMUR, WESTERN N/A PUBLIC CHARITY GENERAL USE PROVINCE 909 WEST SHAW FORT WORTH, TX 76110 10000. ST JOSEPH'S CATHOLIC CHURCH N/A CATHOLIC CHURCHGENERAL USE 1927 SW GREEN OAKS BLVD ARLINGTON, TX 76017 5000. ST JOSEPH'S CATHOLIC SCHOOL CATHOLIC SCHOOLGENERAL USE N/A 2015 GREEN OAKS BLVD ARLINGTON, TX 76017 5000. Total from continuation sheets

FORM 990-PF INTERE	ST ON SAVING	GS AND	TEMPOR	ARY CASH	INV	ESTMENTS	ST	ATEMENT	1
SOURCE			(A) REVENUE NE PER BOOKS		(B) ET INVESTMENT INCOME		(C) ADJUSTED NET INCOME		E
INTEREST PER K-1 FORTRESS MERRILL LYNCH MERRILL LYNCH ACCRETION MERRILL LYNCH AMORTIZATION			296. 9626. 10990. -6248.		296. 9626. 10990. -6248.				
TOTAL TO PART I, LI	NE 3		14664.		14664.				
FORM 990-PF	DIVIDENDS	AND IN	TEREST	FROM SEC	CURIT	ries	ST	ATEMENT	2
SOURCE	GROSS AMOUNT	GAINS RE		REVENUE	(A) (REVENUE NET I ER BOOKS MENT		EST- ADJUST		
DIVIDENDS PER K-1 FORTRESS PROPERTIES MERRILL LYNCH-DVDS	2486. 85608.		0.	248 8560		248 8560			
TO PART I, LINE 4	88094.		0.	8809	94.	8809	4.		
FORM 990-PF		OTHE	R INCO	ME			ST	ATEMENT	3
DESCRIPTION			RE	(A) JENUE BOOKS		(B) I INVEST- NT INCOME		(C) ADJUSTEI NET INCOI	
MISCELLANEOUS INCOME	E/-LOSS			80. 1045.		80 1045			
TOTAL TO FORM 990-P	F, PART I, 1	LINE 11		1125.		1125	- -		

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT		
DESCRIPTION		(B) NET INVEST- MENT INCOME		CHARITAB	
ACCOUNTING	7950.	5300.		265	0.
TO FORM 990-PF, PG 1, LN 16B	7950.	5300.		265	0.
FORM 990-PF (OTHER PROFES	SIONAL FEES	S	TATEMENT	5
DESCRIPTION		(B) NET INVEST- MENT INCOME		CHARITAB:	
INVESTMENT FEES	37304.	24869.		1243	5.
TO FORM 990-PF, PG 1, LN 16C	37304.	24869.		1243	5 .
FORM 990-PF	TAX	ES	S'	TATEMENT	6
DESCRIPTION		(B) NET INVEST- MENT INCOME		CHARITAB	
FOREIGN TAX PAID	268.	268.			0.
TO FORM 990-PF, PG 1, LN 18	268.	268.			0.
FORM 990-PF	OTHER EXPENSES		STATEMENT		7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABI PURPOSE:	
					_
MISCELLANEOUS DUES & SUBSCRIPTIONS	329. 750.	329. 750.			0.

FORM 990-PF COR	PORATE STOCK		STATEMENT	8
DESCRIPTION		BOOK VALUE	FAIR MARKE VALUE	Т
EQUITIES MUTUAL FUNDS	-	1550589. 3232082.	26231 36732	
TOTAL TO FORM 990-PF, PART II, LINE	10B	4782671.	6296396.	
FORM 990-PF COR	PORATE BONDS		STATEMENT	9
DESCRIPTION		BOOK VALUE	FAIR MARKE VALUE	T
CORPORATE BONDS	-	45713.	510	49.
TOTAL TO FORM 990-PF, PART II, LINE	10C	45713.	510	49.
FORM 990-PF OTHER	R INVESTMENTS		STATEMENT	10
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKE VALUE	Т
FORTRESS PROPERTIES, LTD	COST	4110860.	3064307	
TOTAL TO FORM 990-PF, PART II, LINE	13	4110860.	30643	07.
	V - LINE 1A NDATION MANAGE	D.C.	STATEMENT	11

NAME OF MANAGER

BENJAMIN L DOSKOCIL SR MARY FRANCES DOSKOCIL