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

ror	cale	ndar year 2017 or tax year beginning		, and ending		
Na	me o	f foundation			A Employer identification	n number
T	AR	RIS & ELIZA KEMPNER FU	ND, INC.		76-0680130	
		and street (or P O box number if mail is not delivered to stre	et address)	Room/suite	B Telephone number	
_2	20	1 MARKET SUITE #1250			409-762-16	503
		town, state or province, country, and ZIP or foreign. IVESTON,TX 77550–1529	postal code	•	C If exemption application is p	pending, check here
_		call that apply: Initial return	Initial return of a f	ormer public charity	D 1. Foreign organization	s check here
•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Final return	Amended return	officer public charity		
		Address change	Name change		Foreign organizations me check here and attach co	seting the 85% test, pmputation
H (hecl	type of organization: X Section 501(c)(3)	exempt private foundation	n(/	E If private foundation sta	
<u>L</u>		ection 4947(a)(1) nonexempt charitable trust	Other taxable private found	ation 0 ψ	under section 507(b)(1	
		· —	ting method: LX Cash	Accrual '	F If the foundation is in a	60-month termination
		Part II, col. (c), line 16)	Other (specify)	\	under section 507(b)(1)(B), check here 🕨 📖
	·\$ irtil	51,200,608. (Part I, cold Analysis of Revenue and Expenses	1			[(d\n ,
P.E	اونارا	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	266,300.		N/A	
	2	Check If the foundation is not required to attach Sch B Interest on savings and temporary	CHUSTALESCALE		CFLICIBLE MAIN	
A	3	cash investments	85,383.	85,383.		STATEMENT 1
Š	٩	Dividends and interest from securities Gross rents	1,080,935.	1,080,935.	-	STATEMENT 2
2 2 2		Net rental income or (loss)	\$51424555EX-84248E34232			
# 2	١.	Net gain or (loss) from sale of assets not on line 10	1,864,253.		ACTIVITIES OF THE STATE OF THE	MARIA CARACTER AND
Revenue	T	Gross sales price for all assets on line 6a 8,007,045.				
. A	7	Capital gain net income (from Part IV, line 2)		1,864,253.		
, ac	8 Net short-term capital gain		CELEBORANCE MAY			TOTAL PROPERTY.
•	9	Income modifications Gross sales less returns			i i	
,	10a	and allowances			ALLEGATIVE SERVICE	PARTIE DE LA COMPANSION
		Less Cost of goods sold	William William Co.			
	11	Gross profit or (loss) Other income	109,509.	103,907.	,	STATEMENT 3
		Total. Add lines 1 through 11	3,406,380.			
_	13	Compensation of officers, directors, trustees, etc	120,420.	0.		120,420.
	14	Other employee salaries and wages	74,338.	0.		74,338.
,	15	Pension plans, employee benefits	18,927.	0.	REGEIVED	18,927.
sesued:	16a	Legal fees				72
per		Accounting fees STMT 4	42,890.	16,425	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	26,465.
Û.		Other professional fees STMT 5	226,164.	222,496.	MOARAGO	0 3,668.
Operating and Administrative Ex	17 18	Taxes STMT 6	55,548.	13,358.	CODENIII	15,031.
istra	19	Depreciation and depletion	33,340.	13,330.	OGDEN, U	
пin	20	Occupancy	13,788.	0.		13,788.
Adi	21	Travel, conferences, and meetings	10,865.	0.		10,865.
and	22	Printing and publications				
bu	23	Other expenses STMT 7	443,016.	168,314.		74,702.
rati	24	Total operating and administrative	4 005 056	400 500	ļ	252 224
Ö		expenses. Add lines 13 through 23	1,005,956.	420,588.	STATE OF FIFE AND ANDREAS TO STATE OF S	358,204.
_	25 26	Contributions, gifts, grants paid Total expenses and disbursements.	1,890,012.			1,896,012.
		*Add lines 24 and 25	2,901,968.	420,588.		2,254,216.
_		Subtract line 26 from line 12:			THE TANK THE PROPERTY OF THE	
		Excess of revenue over expenses and disbursements	504,412.			
		Net investment income (if negative, enter -0-)	PATRICTURE PARTIES.	2,713,890.		
	C	Adjusted net income (if negative, enter -0-)	THE PERSON NAMED IN		N/A	

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions.

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POI	m 99	0-PF (2017) HARRIS & ELIZA KEMPNER		76-	0680130 Page 2
	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		of year
	<u>αι τ</u>	Balance Sneets column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	255,520.	201,370.	
	2	Savings and temporary cash investments	5,006,232.	5,214,298.	5,214,298.
	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			
	7	Other notes and loans receivable	,		
		Less; allowance for doubtful accounts		37,141.	37,141.
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges	44,993.	17,854.	17,854.
Ä		Investments - U.S. and state government obligations STMT 9	5,965,769.	6,050,570.	
		Investments - corporate stock STMT 10	26,794,991.	26,814,764.	32,512,978.
	i	Investments - corporate bonds			
	l	Investments - land, buildings, and equipment basis			1
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 11	6,149,813.	6,499,316.	7,139,549.
	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation			
	15	Other assets (describe ►)			
	ı	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	44.302.667.	44.835.313.	51,200,608.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ý	19	Deferred revenue			†
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			}
ā	21	Mortgages and other notes payable			
=	22	Other liabilities (describe >			
_	23_	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.			
Ses	24	Unrestricted			1
Net Assets or Fund Balances	25	Temporarily restricted			
Ва	26	Permanently restricted			1
Ē		Foundations that do not follow SFAS 117, check here			,
Ę		and complete lines 27 through 31.			1
S	27	Capital stock, trust principal, or current funds	0.	0.	
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	Ì
As	29	Retained earnings, accumulated income, endowment, or other funds	44,302,667.	44,835,313.	
Šet	30	Total net assets or fund balances	44,302,667.	44,835,313.	1
_					
	31	Total liabilities and net assets/fund balances	44,302,667.	44,835,313.	
Г	art	Analysis of Changes in Net Assets or Fund E	Ralances		
	art	The state of the s			
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
	(mus	t agree with end-of-year figure reported on prior year's return)		1	44,302,667.
2	Ente	amount from Part I, line 27a		2	504,412.
		increases not included in line 2 (itemize)	SEE STA	ATEMENT 8 3	28,234.
4	Add	ines 1, 2, and 3		4	44,835,313.
		eases not included in line 2 (itemize)			0.
6_	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	column (b), line 30	6	44,835,313.
					Form 990-PF (2017)

See the Part VI instructions.

	m 990-PF (2017) HARRIS & ELIZA KEMPNER FUND, INC. art VI Excise Tax Based on Investment Income (Section 4940(a), 49	940(b), 4940(e), or 4	76-0	680130 see instru		age 4
Ь.	a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A"					1
,	Date of ruling or determination letter: (attach copy of letter if necessary-se					-
ь	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here		1	2	7,1	39.
_	of Part I, line 27b	id officer 170			<u>, , </u>	
c	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I,	. line 12. col. (b).				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter	• • •	2	· · · · · · · · · · · · · · · · · · ·		0.
3	Add lines 1 and 2	• /	3	2'	7,1	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter	er -0-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	,	5	2'	7,13	39.
6	Credits/Payments:					
а	a 2017 estimated tax payments and 2016 overpayment credited to 2017 6a	43,674.			•	
	b Exempt foreign organizations - tax withheld at source 6b	0.				
C	c Tax paid with application for extension of time to file (Form 8868) 6c	0.				}
d	d Backup withholding erroneously withheld 6d	0.				
7	Total credits and payments. Add lines 6a through 6d	<u>-</u>	7	4	3,6	7 4 .
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8			0.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ 1	9		_	
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶	10	10	6,53	35.
11	Enter the amount of line 10 to be: Credited to 2018 estimated tax	,535. Refunded ▶	11			0.
Pa	art VII-A Statements Regarding Activities					
1a	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or d	lid it participate or intervene	ın		Yes	No
	any political campaign?			1a		<u>X</u>
b	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	the instructions for the defin	ition	1b		<u>X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mate	erials published or		i 1]
	distributed by the foundation in connection with the activities.]
C	c Did the foundation file Form 1120-POL for this year?			1c		<u>X</u> _
đ	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				ŀ)
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$	0.				
е	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax in	nposed on foundation			ŀ	- 1
,	managers. ► \$0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		<u> </u>
	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument	t, articles of incorporation, o	r			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		<u>X</u>
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		1-	_ 4a		<u>X</u>
	b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A		\dashv	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T					
ь	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or Puratety language that effectively among the purely mark to the control of t					
	By state legislation that effectively amends the governing instrument so that no mandatory direction section in the government of the contraction of the con	is that conflict with the state	iaw		- - -	ال ــــــ
7	remain in the governing instrument?	Last (a) and Dawl Mr		6	X	—
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II	i, coi. (c), and Part XV		7	Х	_†
0.	a. Enter the cratec to which the foundation reports or with which it is required. Can instruction					ļ
oa	a Enter the states to which the foundation reports or with which it is registered. See instructions. ▶			— I I	-	ļ
	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Ge	noral (or designate)		— [.]		ļ
O		merar (or designate)			-ਦੂ-∤ਾ	
Δ	of each state as required by General Instruction G? If "No," attach explanation Is the foundation claiming status as a private operating foundation within the meaning of section 4942	2(1)(2) or 4042(1)(5) for1-	ndor	8b	Х	—
3			nuar	- <u>-</u> - -		~ '>
10	year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the			10	\longrightarrow	$\frac{\mathbf{x}}{\mathbf{v}}$
-10	bio any persons become substantial continuators during the lax year? If "Yes," attach a schedule listing the	eir names and addresses		Form 990	-PF /	<u>^</u> 2017\
				LOUIN 330	• • (/	2011)

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X

3b

4a

🗌 Yes 🗶 No

N/A

during the year?

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2017.)

had not been removed from jeopardy before the first day of the tax year beginning in 2017?

b If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or beguest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C.

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

orm 990-PF (2017) HARRIS & ELIZA KEMPNER F	UND, INC.		76-06801	30	Page 6
 Part VIi-B Statements Regarding Activities for Which I 5a During the year, did the foundation pay or incur any amount to: Carry on propaganda, or otherwise attempt to influence legislation (section 2). Influence the outcome of any specific public election (see section 4955); of any voter registration drive? Provide a grant to an individual for travel, study, or other similar purposes 4945(d)(4)(A)? See instructions Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals? If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53.4945 or in a current notice regarding disaster assistance? See instructions relying on a current notice regarding disaster assistance, check if the answer is "Yes" to question 5a(4), does the foundation claim exemption from the expenditure responsibility for the grant? "Yes," attach the statement required by Regulations section 53.4945-5(d). 	Form 4720 May Be F n 4945(e))? or to carry on, directly or indirectly or described in section or educational purposes, or f der the exceptions described in uctions here rom the tax because it maintal	ectly, Ye Ye Ye Ye Ye Ye Ye Ye Tor Regulations	s X No s X No s X No s X No	Yes	
 6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a p 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 	personal benefit contract?		s X No	6b	X
Part VIII Information About Officers, Directors, Trustoral Employees, and Contractors List all officers, directors, trustees, and foundation managers and to	ees, Foundation Ma	nagers, Highly		7b	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp account allowa	, other
SEE STATEMENT 12		120,420.	11,703.		0.
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp account, allowa	, other
HARRETTE M HOWARD - 2201 MARKET SUITE 1250, GALVESTON, TX 77550	GRANTS ADMINI 40.00	STRATOR 74,338.	7,224.		0.
Total number of other employees paid over \$50,000			.		0

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations m	nust c	omplete t	his part. Foreign four	ndations,	see instructions.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable	e. etc.	purposes:				
a	Average monthly fair market value of securities	.,	, , , ,		1a	43,365,9	86.
b	Average of monthly cash balances				1b	43,365,9 2,337,0	75.
C	Fair market value of all other assets				1c		
d	Total (add lines 1a, b, and c)				1d	45,703,0	61.
е	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	45,703,0	
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount,	see ir	structions		4	685,5	
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on				5	45,017,5	
6	Minimum investment return. Enter 5% of line 5		•		6	2,250,8	
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and foreign organizations, check here ▶ ☐ and do not complete this part.)		5) private o	perating foundations ar	id certain		•
1	Minimum investment return from Part X, line 6				1	2,250,8	<u> 76.</u>
2a	Tax on investment income for 2017 from Part VI, line 5	2a		27,139.			
b	Income tax for 2017. (This does not include the tax from Part VI.)	2b					
C	Add lines 2a and 2b				2c	27,1	
3	Distributable amount before adjustments. Subtract line 2c from line 1				3	2,223,7	<u>37.</u>
4	Recoveries of amounts treated as qualifying distributions			i	4		0.
5	Add lines 3 and 4			1	5	2,223,7	<u>37.</u>
6	Deduction from distributable amount (see instructions)			!	6		0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part	XIII, lı	ne 1		7	2,223,7	<u>37.</u>
P	art XII Qualifying Distributions (see instructions)						
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purp	oses:					
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26				1a	2,254,2	
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 charitab	ile, etc	., purposes		2		
3	Amounts set aside for specific charitable projects that satisfy the:						
а	Suitability test (prior IRS approval required)			,	3a		
b	Cash distribution test (attach the required schedule)				3b		
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and				4	2,254,2	16.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investigations.	stmen	t	i			
	income. Enter 1% of Part I, line 27b			1	5	27,1	
6	Adjusted qualifying distributions Subtract line 5 from line 4				6	2,227,0	<u>77.</u>
	Note: The amount on line 6 will be used in Part V. column (b), in subsequent years w	hen ca	alculatino w	hether the foundation of	qualifies for	the section	

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2	2017 from Part XI,				
line 7	<u> </u>				2,223,737.
2 Undistributed income, if any, a					
a Enter amount for 2016 on	nly _			0.	
b Total for prior years:			0.		
3 Excess distributions carry	vover if any to 2017:				
a From 2012	0.00, u, to 2011.				
b From 2013	24,248.				
c From 2014	21,2101				
d From 2015					
e From 2016	79,194.				
f Total of lines 3a through 6		103,442.			
4 Qualifying distributions fo					
Part XII, line 4: ►\$	· · · · · · · · · · · · · · · · · · ·				
a Applied to 2016, but not n				0.	1
b Applied to undistributed in				•	
years (Election required -			0.		
c Treated as distributions of	· F				
(Election required - see in:		0.			
d Applied to 2017 distributa	, F	•			2,223,737.
e Remaining amount distrib		30,479.			2,223,131.
5 Excess distributions carryover	· F	0.			0.
(If an amount appears in columnust be shown in column (a))	nn (d), the same amount	· ·			
6 Enter the net total of each indicated below:					
a Corpus Add lines 3f, 4c, and 4	4e Subtract line 5	133,921.			ļ
b Prior years' undistributed		•			
line 4b from line 2b			0.		,
c Enter the amount of prior	years'				†
undistributed income for v	which a notice of			·	5
deficiency has been issued the section 4942(a) tax ha					,
assessed	13 Book proviously		0.		l
d Subtract line 6c from line	6b. Taxable]
amount - see instructions			0.		
e Undistributed income for 2	2016. Subtract line				
4a from line 2a. Taxable a				0.	•
f Undistributed income for t	2017. Subtract				
lines 4d and 5 from line 1.	. This amount must	•			
be distributed in 2018	Ĺ				0.
7 Amounts treated as distrib	outions out of				
corpus to satisfy requirem	nents imposed by				1
section 170(b)(1)(F) or 49	942(g)(3) (Election				1
may be required - see inst	tructions)	0.			· · · · · · · · · · · · · · · · · · ·
8 Excess distributions carry					
not applied on line 5 or lin	ne 7	0.			
9 Excess distributions carry	·				
Subtract lines 7 and 8 from	m line 6a	133,921.			
10 Analysis of line 9:					'
a Excess from 2013	24,248.				;
b Excess from 2014					,
c Excess from 2015					د
d Excess from 2016	79,194.				
e Excess from 2017	30,479.				<u> </u>

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Form **990-PF** (2017)

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1 a If the foundation has received a ruling of			171, 400011071 07	N/A	
foundation, and the ruling is effective fo		· · · · · · · · · · · · · · · · · · ·			
b Check box to indicate whether the found		=	n section	4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
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	-			1 /	
c Qualifying distributions from Part XII,				 / .	
line 4 for each year listed					
d Amounts included in line 2c not		-	1	// 	
used directly for active conduct of			/		
exempt activities		1			
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			ľ		
• •	-	/			
(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		ľ			
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				<u> </u>	
(4) Gross investment income Part XV Supplementary Info		An Abin mant amb.	is the second dation		
at any time during t			ir the foundation	າ nad ຈອ,ບບບ or m	ore in assets
 Information Regarding Foundation List any managers of the foundation wh 	•	than 20/ of the total cont	ributions received by the	a foundation before the ele	on of any tay
year (but only if they have contributed r			noutions received by the	e toutidation before the cio	se of any lax
NONE	, , , ,	· · · (-)(-)/			
b List any managers of the foundation wh	n own 10% or more of th	e stock of a corporation i	for an equally large ports	ion of the ownership of a n	artnership or
other entity) of which the foundation ha			tor an equally large port	ion of the ownership of a p	artificially of
NONE					
2 Information Regarding Contribut	ion. Grant. Gift. Loan.	Scholarship, etc., Pr	ograms:		
Check here ▶ ☐ If the foundation of		•	-	not accept unsolicited regi	iests for funds. If
the foundation makes gifts, grants, etc.,					
a The name, address, and telephone num	ber or email address of th	ne person to whom applic	ations should be addres	ssed:	
HARRIS & ELIZA KEMPN					ND ORG
2201 MARKET ST. SUIT	-	•			
b The form in which applications should t					
SEE WEBSITE - WWW.KE				C	•
c Any submission deadlines:	'	_,			
-	MPNERFUND.O	RG/APP/GUID	ELINES.HTM	<u>L</u>	
d Any restrictions or limitations on award					
SEE WEBSITE - WWW.KE	MPNERFUND.O	RG/APP/GUID	ELINES.HTM	L .	

Total

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

Enter gross amounts unless otherwise indicated.	Unrelated	1 business income		ed by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	
a	_			_	
b			 		
<u> </u>					
d	_	_ .			····
e					· -
g Fees and contracts from government agencies			 		
2 Membership dues and assessments			-		
3 Interest on savings and temporary cash			امدا	05 202	
Investments			14	85,383.	
4 Dividends and interest from securities			14	1,080,935.	
5 Net rental income or (loss) from real estate:			-		
a Debt-financed property					· ··
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income			15	102,839.	
8 Gain or (loss) from sales of assets other than inventory					1,864,253.
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a SEE STATEMENT 13	1	5,602.		1,068.	
b		•		•	
C					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		5,602.		1,270,225.	1,864,253.
13 Total. Add line 12, columns (b), (d), and (e)				13	3,140,080.
(See worksheet in line 13 instructions to verify calculations.)				

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

Line No.	Explain below	how each activity	y for whic	ch income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of
	the foundation	's exempt purpo	ises (othe	er than by providing funds for such purposes).
3	PROVIDES	INCOME	FOR	GRANTS.
4	PROVIDES	INCOME	FOR	GRANTS.
7	PROVIDES	INCOME	FOR	GRANTS.
11	PROVIDES	INCOME	FOR	GRANTS.
		<u> </u>		
	_			
			·	

Form **990-PF** (2017)

Form 99			MPNER FUND, INC	. 76-(nd Relationships With Non)680130	Page 13
, ait	Exempt Organ		to and Transactions ar	nd neiationships with Non-	Cilaritable	
1 Di		· · · · · · · · · · · · · · · · · · ·	ollowing with any other organization	n described in section 501(c)		Yes No
			elating to political organizations?	, ,		
a Tr	ansfers from the reporting found	lation to a noncharitable exen	npt organization of;			_
(1	Cash				1a(1)	X
(2	Other assets				1a(2)	X
	her transactions:				.	
	Sales of assets to a noncharita	· -			1b(1)	<u> X</u>
	Purchases of assets from a no	· -	tion		1b(2)	X
	Rental of facilities, equipment,			•	1b(3)	X
	Reimbursement arrangements Loans or loan guarantees	;			1b(4) 1b(5)	X
	Performance of services or me	embershin or fundraising soli	reitatione		1b(6)	X
-	aring of facilities, equipment, ma	_			1c	X
				vays show the fair market value of the go		
		-		e in any transaction or sharing arrangen		,
co	lumn (d) the value of the goods,	other assets, or services reco	eived.	,		
(a) Line i	no (b) Amount involved	(c) Name of noncha	ritable exempt organization	(d) Description of transfers, transaction	s, and sharing arra	ingements
		N,	<u>/A</u>			
	 -					
					* .	
						
	_	-	·			
	-			+		
	 					
	 					
	<u>-</u>					
		1				
ın	the foundation directly or indirect section 501(c) (other than section Yes," complete the following sch	on 501(c)(3)) or in section 52	o, one or more tax-exempt organiz 77	rations described	Yes	X No
	(a) Name of org		(b) Type of organization	(c) Description of rela	ationship	
	N/A					
		-				
	1			<u> </u>		
Sign Here	Under penalties of perjury, I declare and belief it is true correct, and color Signature of officer or trustee	mplete Declaration of preparer (oth	ncluding accompanying schedules and sher than taxpayer) is based on all information of the state	statements, and to the best of my knowledge atton of which preparer has any knowledge EXECUTIVE DIRECTOR Title	May the IRS direturn with the shown below? X Yes	preparer
	Print/Type preparer's na		er's signature		PTIN	
				self- employed		
Paid	ANN S. MAS	SEL, CPA	my any and	10/23/18	P007583	L50
Prep			BREZINA, LLP	Firm's EIN ► 76		

Phone no. 409-765-9311

Use Only

Firm's address ▶ 1011 TREMONT STREET

GALVESTON, TX 77550

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Name of the organization

Employer identification number

Н	ARRIS & ELIZA KEMPNER FUND, INC.	76-0680130
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	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Note: Only a section 501(d	is covered by the General Rule or a Special Rule . c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special F	
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor.	
Special Rules		
sections 509(a)(1) any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16 tor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount of the complete Parts I and II	a, or 16b, and that received from
year, total contrib	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from outions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educruelty to children or animals. Complete Parts I, II, and III.	
year, contribution is checked, enter purpose. Don't co	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from sexclusively for religious, chantable, etc., purposes, but no such contributions totaled here the total contributions that were received during the year for an exclusively religion proplete any of the parts unless the General Rule applies to this organization because in lete, etc., contributions totaling \$5,000 or more during the year	more than \$1,000 If this box us, charitable, etc ,
but it must answer "No" o	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B in Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its 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

Employer identification number

•					
HARRIS	۶	ELTZA	KEMPNER	FIIND.	TNC

76-0680130

muut	D & EDIZA REMPNER FUND, INC.		-0000130
Part I	Contributors (see instructions) Use duplicate copies of Part I if add	ditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	FOSTER FARMS PO BOX 2119 GALVESTON, TX 77553	\$15,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	CULLEN FROST 2201 MARKET ST. GALVESTON, TX 77550	\$251,300.	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 Oncash (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 Oncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Moncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

HARRIS & ELIZA KEMPNER FUND, INC.

76-0680130

	ELIZA KEMPNER FUND, INC. Ioncash Property (see instructions). Use duplicate copies of Pa		-0680130
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	JLLEN FROST STOCK		04/20/17
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	04/30/17 (d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_ _			
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	· (d) Date received
_ _		 \$	

Name of orga	anization	· · · · · · · · · · · · · · · · · · ·	Employer identification number
Пурртс	& ELIZA KEMPNER FUND,	TNC	76 0690130
Part III	Exclusively religious, charitable, etc., contitude the year from any one contributor. Complete completing Part III, enter the total of exclusively religious. Use duplicate copies of Part III if additions.	olumns (a) through (e) and the folions, charitable, etc., contributions of \$1,000 or	76-0680130 In section 501(c)(7), (8), or (10) that total more than \$1,000 for wing line entry. For organizations riess for the year (Enter this info once) \$\Bigsir \frac{1}{5} \\ \frac
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	t ·
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
-	Transferee's name, address, ar		Relationship of transferor to transferee
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, ar	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			
		(e) Transfer of gift	<u> </u>
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee

FORM 990-PF INTERE	ROM ON CAUTM	CC AND O	IEMDOD:	ADV C	OU TN	TAR COMENI	ne e	PATEMENT	1
TORM 990-PF INTERE	EST ON SAVINO					VESTMEN.		TATEMENT	
			(A)	_		(B)	_	(C)	
SOURCE			EVENUE R BOOKS			VESTMENT COME		ADJUSTED NET INCOM	Ε
INTEREST INCOME			85,38	33.		85,383	•	**	
TOTAL TO PART I, L	INE 3		85,38	33.		85,383.			
FORM 990-PF	DIVIDENDS	AND INT	EREST	FROM	SECUR	ITIES	S'		2
SOURCE	GROSS AMOUNT	CAPIT GAIN DIVIDE	1S	(F REVE PER F	ENUE	(B) NET INV MENT IN	VEST-	(C) ADJUST NET INC	
DIVIDEND INCOME	1,080,935.		0.	1,080	935.	1,080	,935.		
TO PART I, LINE 4	1,080,935.		0.	1,080),935.	1,080	,935.		
FORM 990-PF		OTHER	RINCO	ME			S'	PATEMENT	3
DESCRIPTION			RE	(A) VENUE BOOKS		(B) ET INVES		(C) ADJUSTE	
ROYALTIES OTHER INC K-1 PORTFOLIO INC/I BLACKSTONE MINERALS BLACKSTONE MINERALS LITIGATION INCOME FOSTER FARMS (LOSS) DISTRIBUTIONS	S CO K-1 S LP K-1			-14,7 6,0 1,9 3,9)53.	-14,7 1,9 3,9	053.		
TOTAL TO FORM 990-E	PF, PART I, I	LINE 11		109,5		103,9	907.	····	

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
ANNUAL AUDIT ACCOUNTING & TAX PREP	16,425. 26,465.	16,425.		0. 26,465.		
TO FORM 990-PF, PG 1, LN 16B	42,890.	16,425.		26,465.		
FORM 990-PF	OTHER PROFES	SIONAL FEES	S'	ratement 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
PENSION ADMIN	3,668.	0.		3,668.		
KEMPNER CAPITAL MGMT - PORTFOLIO MGN	59,120.	59,120.		0.		
NEUBERGER BERMAN - PORTFOLIO MGN	81,645.	81,645.		0.		
CLEARBRIDGE - PORTFOLIO MGN	54,984.	54,984.		0.		
BRECKINRIDGE - PORTFOLIO MGN	26,747.	26,747.		0.		
TO FORM 990-PF, PG 1, LN 16C	226,164.	222,496.		3,668.		
FORM 990-PF	TAX	ES	. S'	ratement 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
CALIFORNIA TAX EXCISE & UBIT TAXES FOREIGN TAXES ON	25. 27,139.	0.		0.		
SECURITIES PAYROLL TAXES	13,353. 15,031.	13,353. 0.		0. 15,031.		
TO FORM 990-PF, PG 1, LN 18	55,548.	13,353.		15,031.		

FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
CONDUMED COMMUNDS C CEDUTORS	10.700	· · · · · · · · · · · · · · · · · · ·		
COMPUTER SOFTWARE & SERVICES	12,722.	0.		12,722.
ENTERTAINMENT INSURANCE	843.	0.		843.
INSURANCE KEMPNER PAPER PRESERVATION	46,245. 917.	0.	4	46,245. 917.
LEASED OFFICE EQUIPMENT	_		•	
MEMBERSHIP FEES	3,354. 3,800.	0.		3,354.
MISCELLANEOUS	1,061.	0.		3,800. 1,061.
OFFICE SUPPLIES	720.		•	720.
OTHER INVESTMENT EXPENSE	120.	0.		720.
K-1'S	161,853.	161,853.		0.
PARKING	1,890.	0.		1,890.
REGISTRATION FEES	3,066.	0.		3,066
OTHER INVESTMENT EXPENSE	3,000.	,		5,000.
(UBS)	6,461.	6,461.		0.
SUBSCRIPTIONS AND PRINTED	0,1010	0,101.		•
MATERIAL	84.	0.		. 84.
CONTRIBUTIONS NOT PART OF	~ _ ·			-
REQUIRED DISTRIBUTIONS	200,000.	0.		0.
TO FORM 990-PF, PG 1, LN 23	443,016.	168,314.		74,702.
FORM 990-PF OTHER INCREASES	IN NET ASS	ETS OR FUND BA	LANCES S	TATEMENT 8
DESCRIPTION				AMOUNT
UNREALIZED GAIN ON SECURITIES	(K-1)			28,234.
TOTAL TO FORM 990-PF, PART II	I. LINE 3			28,234.

FORM 990-PF U.S. AND ST	PATE/CITY GOVERNMENT	r OBLIGATIONS	STATEMENT	9
DESCRIPTION	U.S. OTHER GOV'T GOV'T	BOOK VALUE	FAIR MARKET VALUE	<u>!</u>
US GOVT & FIXED INCOME BONDS	<u>x</u>	6,050,570.	6,077,41	.8.
TOTAL U.S. GOVERNMENT OBLIGATI	ONS	6,050,570.	6,077,41	.8.
TOTAL STATE AND MUNICIPAL GOVE	ERNMENT OBLIGATIONS			
TOTAL TO FORM 990-PF, PART II,	LINE 10A	6,050,570.	6,077,41	8.
FORM 990-PF	CORPORATE STOCK	·	STATEMENT	10
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	ŀ
CORPORATE STOCKS		26,814,764.	32,512,97	8.
TOTAL TO FORM 990-PF, PART II,	LINE 10B	26,814,764.	32,512,97	8.
FORM 990-PF	OTHER INVESTMENTS		STATEMENT	11
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	!
OTHER INVESTMENTS	FMV	6,499,316.	7,139,54	9.
TOTAL TO FORM 990-PF, PART II,	LINE 13	6,499,316.	7,139,54	9.

	LIST OF OFFICERS, D AND FOUNDATION MANA		STAT	EMENT 12
NAME AND ADDRESS	TITLE AND AVRG HRS/WK			EXPENSE
ANNE BRASIER 2201 MARKET SUITE 1250 GALVESTON, TX 77550	EXECUTIVE DIRE 40.00		11,703.	0.
CAROL ROBERTS 2201 MARKET SUITE 1250 GALVESTON, TX 77550	SECRETARY 4.00	0.	0.	0.
ROBERT L K LYNCH 2201 MARKET SUITE 1250 GALVESTON, TX 77550	PRESIDENT 10.00	0.	0.	0.
BARBARA W SASSER 2201 MARKET SUITE 1250 GALVESTON, TX 77550	HON DIRECTOR 4.00	0.	0.	0.
ARMIN CANTINI 2201 MARKET SUITE 1250 GALVESTON, TX 77550	DIRECTOR 4.00	· 0.	0.	0.
ELIZA QUIGLEY 2201 MARKET SUITE 1250 GALVESTON, TX 77550	VICE PRESIDENT 4.00	0.	0.	0.
VICTORIA MARCHAND 2201 MARKET SUITE 1250 GALVESTON, TX 77550	TREASURER 4.00	0.	0.	0.
LISA ALLEN 2201 MARKET SUITE 1250 GALVESTON, TX 77550	DIRECTOR 4.00	0.	0.	0.
ANDY MYTELKA 2201 MARKET SUITE 1250 GALVESTON, TX 77550	DIRECTOR 4.00	0.	0.	0.
BROOKE THOMPSON 2201 MARKET SUITE 1250 GALVESTON, TX 77550	DIRECTOR 4.00	0.	0.	0.
CARROLL GOLDSTONE 2201 MARKET SUITE 1250 GALVESTON, TX 77550	DIRECTOR 4.00	0.	0.	0.

HARRIS & ELIZA KEMPNER	FUND, INC.	•				76-0	0680	130
HETTA T KEMPNER 2201 MARKET SUITE 1250 GALVESTON, TX 77550		DIRECTOR 4.00		0.		0.	<u>. </u>	0.
STEPHANIE THOMPSON 2201 MARKET SUITE 1250 GALVESTON, TX 77550		DIRECTOR 4.00		0.		0.		0.
TOTALS INCLUDED ON 990-PF	, PAGE 6,	PART VIII	12	0,420.	11,7	703.	······································	0.
FORM 990-PF	. 07	THER REVENUE			S	STATEME	ENT	13
DESCRIPTION	BUS CODE	UNRELATED BUSINESS INC	EXCL CODE	EXCLU AMOU		RELATE EXEMPT TION I	r FU	NC-
OTHER INC K-1 PORTFOLIO INC/LOSS BLACKSTONE MINERALS CO	211110		01 14		053. 719.		_	
K-1 BLACKSTONE MINERALS LP		5,602.	14		398.			
K-1 LITIGATION INCOME			14 01		977. 966.			

5,602.

1,068.

TOTAL TO FORM 990-PF, PG 12, LN 11

FORM 990-T INCOME (LOSS)	FROM PARTNERS	HIPS	STATEMENT 14
PARTNERSHIP NAME	GROSS INCOME	DEDUCTIONS	NET INCOME OR (LOSS)
BLACKSTONE MINERALS LP (COMMON UNITS)	5,602.	0.	5,602.
BLACKSTONE MINERALS (SUBORDINATED UNITS)	-7,135.	0.	-7,135.
TOTAL TO FORM 990-T, PAGE 1, LINE 5	-1,533.	0.	-1,533.