efile GRAPHIC print - DO NOT PROCESS

DLN: 93491060006039

OMB No 1545-0052

2017

Return of Private Foundation

Department of the Treasury Internal Revenue Service

or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

Inspection

For calendar year 2017, or tax year beginning 06-01-2017 , and ending 05-31-2018 A Employer identification number WEAVER AND TIDWELL PRIVATE FOUNDATION 20-8574509 Number and street (or P O box number if mail is not delivered to street address) 2821 W 7TH ST NO 700 B Telephone number (see instructions) (817) 882-7761 City or town, state or province, country, and ZIP or foreign postal code FORT WORTH, TX $\,$ 76107 ${f C}$ If exemption application is pending, check here ☐ Initial return ☐ Initial return of a former public charity G Check all that apply D 1. Foreign organizations, check here Amended return ☐ Final return 2 Foreign organizations meeting the 85% test, check here and attach computation Address change ☐ Name change E If private foundation status was terminated ☑ Section 501(c)(3) exempt private foundation H Check type of organization under section 507(b)(1)(A), check here \square Section 4947(a)(1) nonexempt charitable trust \square Other taxable private foundation I Fair market value of all assets at end **J** Accounting method ✓ Cash ☐ Accrual If the foundation is in a 60-month termination under section 507(b)(1)(B), check here of year (from Part II, col (c), line 16) \$ 4,519 (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total Disbursements for charitable Revenue and (b) Net investment (c) Adjusted net of amounts in columns (b), (c), and (d) may not necessarily expenses per books purposes equal the amounts in column (a) (see instructions)) (cash basis only) Contributions, gifts, grants, etc , received (attach 40.000 schedule) Check ▶ ☐ If the foundation is **not** required to attach 2 3 Interest on savings and temporary cash investments Dividends and interest from securities Gross rents 5a Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a. 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications . 10a Gross sales less returns and allowances Less Cost of goods sold Gross profit or (loss) (attach schedule) c Other income (attach schedule) 11 Total. Add lines 1 through 11 . . 40,000 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits Operating and Administrative Expenses 16a Legal fees (attach schedule) . . . Accounting fees (attach schedule) . Other professional fees (attach schedule) 18 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion 19 20 21 Travel, conferences, and meetings . 22 Printing and publications . . . 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23 40,000 40,000 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 40,000 40,000 27 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements Net investment income (If negative, enter -0-) Adjusted net income(if negative, enter -0-) For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form **990-PF** (2017)

Form 990-PF (2017)

	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts ▶			
2	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
₽\	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	C	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis 🕨			
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	4,519	4,519	4,5
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Sel	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
틷	21	Mortgages and other notes payable (attach schedule)			
-	22	Other liabilities (describe)			

		Less accumulated depreciation (attach schedule)	1		
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers—see the			
		ınstructions Also, see page 1, ıtem I)	4,519	4,519	4,519
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Liabilities	19	Deferred revenue			
틒	20	Loans from officers, directors, trustees, and other disqualified persons			
lab	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe ▶)			

23 Total liabilities(add lines 17 through 22) Foundations that follow SFAS 117, check here ▶ and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted . Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds

Net Assets or Fund Balances 28 Paid-in or capital surplus, or land, bldg, and equipment fund 0 29 Retained earnings, accumulated income, endowment, or other funds 4,519 4,519 4,519 4,519 30 Total net assets or fund balances (see instructions)

4,519 4,519 31 Total liabilities and net assets/fund balances (see instructions) .

Part III

4,519

4,519

4,519 Form **990-PF** (2017)

0

0

0

2

3

4

5

6

Analysis of Changes in Net Assets or Fund Balances

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

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

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

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize) ▶

2

instructions

Page **3**

	(a) e the kınd(s) of property sold (e g , re arehouse, or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a					
	(f)		(g)	(h)
(e) Gross sales price	Depreciation allowed		other basis		r (loss)
Gross sales price	(or allowable)	plus exp	ense of sale	(e) plus (f) mınus (g)
a					
b					
c					
d					
e					
Complete only for asse	ets showing gain in column (h) and ow	ned by the foundation	on 12/31/69	(I)
· · · · · · · · · · · · · · · · · · ·	(j)	<u> </u>	(k)		h) gain minus
(i) FMV as of 12/31/6	Advicted bacic		of col (ı)		léss than -0-) or
FM V as 01 12/31/6	as of 12/31/69	over col	(j), if any	Losses (fr	om col (h))
a					
b					
С					
d					
e					
	1	If gain, also enter in P	Part I. line 7		
3 Net short-term capita	ne or (net capital loss) Il gain or (loss) as defined in sections : Part I, line 8, column (c) (see instructi		,	3	
			J	<u> </u>	
Part V Qualification	Under Section 4940(e) for Re	educed Tax on Net	Investment In	come	
For optional use by domestic	private foundations subject to the sec	ction 4940(a) tax on ne	et investment incon	ne)	
	leave this part blank the section 4942 tax on the distributal not qualify under section 4940(e) Do		ın the base period	?	es 🔽 No
· · · · · · · · · · · · · · · · · · ·	amount in each column for each year,		making any entrie	15	
(a)	1			(d)	
Base period years Calendar	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	Distribution rati	
year (or tax year beginning in)				(col (b) divided by c	
2016	100,000		4,451		22 466861
2015	85,500		4,451		19 209166
2014	108,000		7,914		13 646702
2013	89,000		4,159		21 399375
2012	117,000		4,712	T	24 830221
2 Total of line 1, column	` '		2		101 552325
2	tio for the 5-year base period—divide	,	, or by the 3		20 210465
	undation has been in existence if less noncharitable-use assets for 2017 fron		4		20 310465
		•			4,451
5 Multiply line 4 by line 3			5		90,402
	ment income (1% of Part I, line 27b)		6		0
			7		90,402
	utions from Part XII, line 4 ,			 ng a 1% tax rate Se	40,000 e the Part VI

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

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

7b

Form **990-PF** (2017)

Form 990-PF (2	017)			
Part VIII	Information About Officers, Dir	irectors, Trustees,	Foundation Managers,	Highly Paid Employees,

Part VIIII and Contractors		,	•	3 . 3 ,	
1 List all officers, directors, truste	es, fo	oundation managers an	d their compensation		1
(a) Name and address	(Title, and average hours per week b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
JOHN MACKEL 2821 W 7TH ST STE 700	PRES 1 00	IDENT	0	C	0
FORT WORTH, TX 76107					
KERRY D CAVES	VICE 1 00	PRESIDENT	0	C	0
2821 W 7TH ST STE 700 FORT WORTH, TX 76107					
JANA L VOLKMAN		SURER	0	C	0
2821 W 7TH ST STE 700	1 00				
FORT WORTH, TX 76107 ANDY FREUNDLICH	SECE	RETARY	0	C	0
2821 W 7TH ST STE 700	1 00		0	·	Ï
FORT WORTH, TX 76107	<u> </u>				WHICHE !!
2 Compensation of five highest-pa (a) Name and address of each employee pa more than \$50,000		Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
NONE				(d) Compensation	
Total number of other employees paid ov					0
3 Five highest-paid independent of (a) Name and address of each person NONE				e of service	(c) Compensation
Total number of others receiving over \$50					0
Part IX-A Summary of Direct (List the foundation's four largest direct charitable organizations and other beneficiaries served, con 1 2	activ	ities during the tax year Incli	ide relevant statistical inform s produced, etc	nation such as the number of	Expenses
3					
4					
Part IX-B Summary of Program Describe the two largest program-related invo				and 2	Amount
1					
2					
All other program-related investments 3					
Total. Add lines 1 through 3 .					000 PF (2017)

5

6

1a

1b

2

3a 3b

4

5

223

223

40,000

40,000

40.000

Form 990-PF (2017)

Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

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

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

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

5

6

1

2

3

4

5

Part XII

223

223

0

Form 990-PF (2017)

(d)

2017

0-PF (20	017)			
XIII	Undistributed Income	(see	instructions')

Form 990-PF (20	017)
Part XIII	Une

b Total for prior years

From 2012.

b From 2013. . . . c From 2014. . .

e From 2016.

d From 2015. . . .

Excess distributions carryover, if any, to 2017

f Total of lines 3a through e.

4 Qualifying distributions for 2017 from Part XII, line 4 🕨 \$ a Applied to 2016, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions). **d** Applied to 2017 distributable amount.

e Remaining amount distributed out of corpus

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

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2012 not

indicated below:

5 Excess distributions carryover applied to 2017

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

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

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2018.

10 Analysis of line 9 a Excess from 2013. .

b Excess from 2014. .

c Excess from 2015. . . .

d Excess from 2016. . .

e Excess from 2017. . .

same amount must be shown in column (a))

1 Distributable amount for 2017 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2017 a Enter amount for 2016 only.

88,792

107 604

85.277 99,777

88.792 107,604

85.277

99.777

39.777

116.764

(a)

Corpus

498.214

39.777

537,991

116.764

421,227

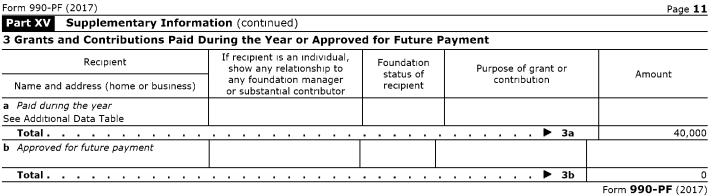
0

(b)

Years prior to 2016

(c)

2016



er gross	amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by section	512, 513, or 514	(e) Related or exempt
Program	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
	and contracts from government agencies					
_	rship dues and assessments					
	st on savings and temporary cash ments					
	ds and interest from securities					
	tal income or (loss) from real estate					
	financed property ebt-financed property					
	ntal income or (loss) from personal property					
	nvestment income					
	r (loss) from sales of assets other than					
	ory					
	profit or (loss) from sales of inventory					
Other r	evenue a					
						<u> </u>
e						
e			0	1.	3	
Subtota Total. (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul	ations)			3	
e Subtota Total. , (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th	ations) e Accomplishi	ment of Exemp	ot Purposes	3	C
Subtota Total. (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul	ations) e Accomplishi ncome is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3ited importantly to	(
eSubtota Total. / (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which in the accomplishment of the foundation's ex	ations) e Accomplishi ncome is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3ited importantly to	(
eSubtota Total. / (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which in the accomplishment of the foundation's ex	ations) e Accomplishi ncome is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3ited importantly to	(
eSubtota Total. / (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which in the accomplishment of the foundation's ex	ations) e Accomplishi ncome is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3ited importantly to	(
eSubtota Total. / (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which in the accomplishment of the foundation's ex	ations) e Accomplishi ncome is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3ited importantly to	(
eSubtota Total. / (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which in the accomplishment of the foundation's ex	ations) e Accomplishi ncome is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3ited importantly to	(
eSubtota Total. / (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which in the accomplishment of the foundation's ex	ations) e Accomplishi ncome is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3ited importantly to	(
eSubtota Total. / (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which in the accomplishment of the foundation's ex	ations) e Accomplishi ncome is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3ited importantly to	(
eSubtota Total. / (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which in the accomplishment of the foundation's ex	ations) e Accomplishi ncome is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3ited importantly to	(
eSubtota Total. / (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which in the accomplishment of the foundation's ex	ations) e Accomplishi ncome is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3ited importantly to	(
eSubtota Total. / (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which in the accomplishment of the foundation's ex	ations) e Accomplishi ncome is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3ited importantly to	(
eSubtota Total. / (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which in the accomplishment of the foundation's ex	ations) e Accomplishi ncome is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3ited importantly to	(
eSubtota Total. / (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which in the accomplishment of the foundation's ex	ations) e Accomplishi ncome is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3ited importantly to	(
eSubtota Total. / (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which in the accomplishment of the foundation's ex	ations) e Accomplishi ncome is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3ited importantly to	(
eSubtota Total. / (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which in the accomplishment of the foundation's ex	ations) e Accomplishi ncome is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3ited importantly to	(
eSubtota Total. / (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which in the accomplishment of the foundation's ex	ations) e Accomplishi ncome is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3ited importantly to	(
eSubtota Total. / (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which in the accomplishment of the foundation's ex	ations) e Accomplishi ncome is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3ited importantly to	C
eSubtota Total. / (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th Explain below how each activity for which in the accomplishment of the foundation's ex	ations) e Accomplishi ncome is reporte	ment of Exemp	ot Purposes Part XVI-A contribu	3ited importantly to	C

orm 99	90-PF (2	.017)							Pa	ge 13
Part	XVII	Information Re Exempt Organi		ransfers To a	and Transactio	ns and Relat	ionships With Nonchar	itable		
		anization directly or in ode (other than sectio					tion described in section 501 al organizations?		Yes	No
a Trai	nsfers fr	om the reporting foun	dation to a n	noncharitable exe	empt organization	of				
(1)	Cash.							1a(1)		No
(2)	Other	assets						1a(2)		No
b Oth	er trans	actions								
(1)	Sales	of assets to a nonchari	table exemp	t organization.				1b(1)		No
(2)	Purcha	ases of assets from a n	oncharitable	e exempt organiz	ation			1b(2)		No
(3)	Rental	of facilities, equipmen	nt, or other a	issets				1b(3)		No
(4)	Reımb	ursement arrangemen	ts					1b(4)		No
(5)	Loans	or loan guarantees.						1b(5)		No
(6)	Perform	nance of services or m	embership o	r fundraısıng sol	ıcıtatıons			1b(6)		No
c Sha	ring of f	facilities, equipment, n	nailing lists,	other assets, or	paid employees.			1c		No
of t	he good ny trans	s, other assets, or ser	vices given b ngement, sh	y the reporting	foundation If the i) the value of the	foundation recei goods, other as	always show the fair market ived less than fair market va- isets, or services received of transfers, transactions, and sh	lue	ngemen	nts
(a) Line	110	(b) Amount involved	(C) Name of	Horicilaritable exer	mpt organization	(u) Description	or transfers, transactions, and si	aring arra	ngemen	
	_									
	_									
	-									
3 - T - H	<i>-</i>	d-1	+1 66 .1 + -		<u> </u>	.				
des	cribed ir	dation directly or indire in section 501(c) of the implete the following so	Code (other					Yes	✓	No
ווט		(a) Name of organization		(t) Type of organization	on	(c) Description of rela	cionship		
	of my		, it is true, co				nying schedules and stateme er than taxpayer) is based o			
Sign Here	-	***** Ignature of officer or t	rustee		2019-02-28)	retu with belo	the prepa w	rer shov	wn
		I I I I I I I I I I I I I I I I I I I	ustee	T	Date	T	(see	ınstr)?	✓ Yes	□No
		Print/Type preparer's	name	Preparer's Sigr	nature	Date	Check if self- employed ▶ □	P01248	3048	
Paid		JUSTIN W REEVES					employed F			

Preparer Use Only Firm's name ➤ WEAVER AND TIDWELL LLP Firm's EIN ▶75-0786316 Firm's address ▶ 2821 W 7TH STREET SUITE 700 Phone no (817) 332-7905 FORT WORTH, TX 76107

Form **990-PF** (2017)

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year THE PARENTING CENTER NONE PC PROVIDE FUNDING FOR 1,500 2928 WEST 5TH STREET PROGRAMS THAT PROVIDE THE FORT WORTH, TX 76107 NECESSARY KNOWLEDGE AND CIVILLE TO HELD EAMILIES 500

			MAINTAIN A HEALTHY LIFE	
SOCIETY OF WOMEN ENGINEERS 130 EAST RANDOLPH STREET SUITE 3500 CHICAGO, IL 60601	NONE	PC	PROVIDE FUNDING FOR EDUCATIONAL AND PROFESSIONAL DEVELOPMENT PROGRAMS FOR FEMALE ENGINEERS	1,50

CHICAGO, IL 60601			PROFESSIONAL DEVELOPMENT PROGRAMS FOR FEMALE ENGINEERS	
RAYS OF HOPE CHILDREN'S GRIEF CENTRE 900 WEST WALL MIDLAND, TX 79701	NONE	PC	PROVIDE FUNDING FOR NO- CHARGE CLASSES, PROGRAMS AND SUMMER CAMPS THAT MEET THE UNIQUE NEEDS OF GRIEVING CHILDREN AND ADOLESCENTS	1,500

ı					
	RAYS OF HOPE CHILDREN'S GRIEF CENTRE 900 WEST WALL	NONE	PC	PROVIDE FUNDING FOR NO- CHARGE CLASSES, PROGRAMS AND SUMMER CAMPS THAT MEET	1,5
	MIDLAND, TX 79701			THE UNIQUE NEEDS OF GRIEVING CHILDREN AND	

Total. 40,000

Form 990PF Part XV Line 3 - Grant	ts and Contributions Paid	During the	Year or Approved for Future F	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
MIDLAND CHILDREN'S REHABILITATION CENTER 802 VENTURA MIDLAND, TX 79705	NONE	PC	PROVIDE FUNDING FOR PROGRAMS THAT PROVIDE REHABILITATION SERVICES TO EVERY CHILD IN THE PERMIAN BASIN WITH A NEOROLOGICAL, ORTHOPEDIC, OR DEVELOPMENT NEED AT LITTLE OR NO COST	2,000
EQUAL HEART4848 LEMMON AVE 513 DALLAS, TX 75219	NONE	PC	PROVIDE FUNDING FOR PROGRAMS THAT ARE FOCUSED ON ALLEVIATING HUNGER AND EXPAND ACCESS TO ENSURE EVERY HUNGRY INDIVIDUAL HAS A DAILY MEAL NO MATTER THEIR CIRCUMSTANCES	1,500
EMBRACE GRACE 700 W BEDFORD EULESS ROAD SUITE G HURST, TX 76053	NONE	PC	PROVIDE FUNDING FOR PROGRAMS THAT EMPOWER CHURCHES ACROSS THE NATION TO BE A SAFE AND NON- JUDGING PLACE FOR SINGLE YOUNG PREGNANT WOMEN	1,000

40,000 Total . . 3a

Form 990PF Part XV Line 3 - Gran	ts and Contributions Paid	During the	Year or Approved for Future	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
EDUCATE MIDLAND 3500 N A STREET SUITE 2700 MIDLAND, TX 79705	NONE	PC	PROVIDES FUNDING FOR PROGRAMS THAT HELP CONNECT STUDENT ACADEMIC NEEDS WITH COLLABORATIVE COMMUNITY SUPPORT AND OFFERS THE NECESSARY HOPE AND OPPORTUNITY FOR ALL STUDENTS TO ACHEIVE THEIR HIGHEST EDUCATIONAL POTENTIAL	2,000
DRESS FOR SUCCESS DALLAS 5580 PETERSON LANE SUITE 155 DALLAS, TX 75240	NONE	PC	PROVIDE FUNDING FOR PROGRAMS THAT HELP PROVIDE PROFESSIONAL ATTIRE TO WOMEN SO THAT MAY SECURE EMPLOYEMENT AND HELP EQUIP THEM WITH CONFIDENCE AND KNOWLEDGE TO SUCCEED	2,000
CHORUS AUSTIN 901 W BRAKER LANE STE 124 AUSTIN, TX 78758	NONE	PC	PROVIDE FUNDING FOR PROGRAMS THAT VITALIZE CHORAL MUSIC IN AUSTIN	1,500
Total				40,000

Form 990PF Part XV Line 3 - Gran	Tana Contributions Paid	During the	Teal of Approved for Future P	ayıncın
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
CENTER FOR CHILDREN'S ADVOCACY 65 ELIZABETH STREET HARTFORD, CT 06105	NONE	PC	PROVIDE FUNDING FOR PROGRAMS THAT HELP PROTECT THE LEGAL RIGHTS OF CONNECTICUT'S MOST VULNERABLE CHILDREN	500
BOYS & GIRLS COUNTRY 18806 ROBERTS ROAD HOCKLEY, TX 77447	NONE	PC	PROVIDE FUNDING FOR PROGRAMS THAT CHANGE THE LIVES OF CHILDREN FROM FAMILIES IN CRISIS BY LOVING AND NURTURING THEM IN A CHRISTIAN HOME ENVIRONMENT, RAISING THEM TO BECOME SELF- SUSTAINING AND CONTRIBUTING ADULTS	1,000
AMERICAN HEART ASSOCIATION - MONTGOMERY COUNTY 10060 BUFFALO SPEEDWAY HOUSTON, TX 77054	NONE	PC	PROVIDE FUNDING FOR PROGRAMS THAT HELP FUND INNOVATIVE RESEARCH, ADVOCACY, AND PATIENT SUPPORT UNTIL NO MORE LOVED ONES ARE LOST TO HEART DISEASE AND STROKE	1,500

40,000 Total . .

form 990PF Part XV Line 3 - Gran	ts and Contributions Paid	During the '	Year or Approved for Future I	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
SPRING BRANCH EDUCATION FOUNDATION - ACADEMY OF FINANCE 955 CAMPBELL ROAD SUITE 206 HOUSTON, TX 77024	NONE	PC	PROVIDE FUNDING SUPPORT FOR APPROVED PROGRAMS FOR SPRING BRANCH INDEPENDENT SCHOOL DISTRICT	1,000
SAN ANTONIO SAVE PROTECT CARE FOR ANIMALS PO BOX 63627 PIPE CREEK, TX 78063	NONE	PC	PROVIDE FUNDING SUPPORT FOR THE ORGANIZATION THAT IS DEDICATED TO THE RESCUE, THE REHABILIATION AND THE PLACEMENT OF ALL GREAT DANES AND OTHER BREEDS THAT ARE IN THE RESCUE	500
THE MIRACLE LEAGUE OF SOUTHLAKE PO BOX 92173 SOUTHLAKE, TX 76092	NONE	PC	PROVIDE FUNDING FOR PROGRAMS THAT PROVIDE A CONTINUED LEGACY OF PROVIDING THE OPPORTUNITY TO PLAY BASEBALL TO CHILDREN AND YOUNG ADULTS WITH SPECIAL NEEDS IN A SAFE, SUPERVISED ENVIRONMENT	500

Total . . 3a 40,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
AGAPE RESOURCES & ASSISTANCE CENTER INC PO BOX 861664 PLANO, TX 750861664	NONE	PC	PROVIDE FUNDING FOR PROGRAMS THAT PROVIDE SAFE, STABLE HOMES AND CRITICAL SUPPORT SERVICES TO HOMELESS WOMEN, MOMS AND CHILDREN THAT EMPOWER THEM TO MOVE FROM CRISIS AND POVERTY TO FULFILLING, SELF-SUSTAINING LIVES	1,000
SHARING HANDS A RESPITE EXPERIENCE 3500 N A STREET SUITE 2500 MIDLAND, TX 79705	NONE	PC	PROVIDE FUNDING FOR PROGRAMS THAT HELP MEMBERS OF FAMILIES WHERE THERE ARE CHILDREN WITH SPECIAL NEEDS, SUPPORTING THEIR EFFORTS TO ESTABLISH AND MAINTAIN STRONG AND SUCCESSFUL FAMILIES	1,500
READING PARTNERS OF NORTH TEXAS 2910 SWISS AVENUE DALLAS, TX 75204	NONE	PC	PROVIDE FUNDING FOR PROGRAMS THAT HELP CHILDREN IN NORTH TEXAS, REGARDLESS OF SOCIOECONOMIC STATUS, HAVE THE OPPORTUNITY TO BECOME	1,000

40,000

STRONG READERS Total .

3а

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year PINK DOORPO BOX 6990 NONE PC PROVIDE FUNDING FOR 1,000 HOUSTON, TX 772656990 PROGRAMS THAT MAKE A

			FIGHTING CANCER THROUGH FINANCIAL SUPPORT FOR EVERYDAY EXPENSES	
NOT IN OUR CITY 1515 EARL OF DUNMORE KATY, TX 77449	NONE	PC	PROVIDE FUNDING FOR PROGRAMS THAT WILL INFORM AND INVEST IN DEFENDING AGAINST SEX TRAFFICKING	1,500

1515 EARL OF DUNMORE KATY, TX 77449			PROGRAMS THAT WILL INFORM AND INVEST IN DEFENDING AGAINST SEX TRAFFICKING	·
HOUSTON BOYCHOIRPO BOX 271342	NONE	PC	PROVIDE FUNDING FOR	1,000

DIFFERENCE FOR WOMEN

40,000

HOUSTON BOYCHOIRPO BOX 271342 NONE PC PROVIDE FUNDING FOR PROGRAMS THAT BUILD MEN OF CHARACTER THROUGH MUSIC	

HOUSTON BOYCHOIRPO BOX 271342	NONE	PC	PROVIDE FUNDING FOR	
HOUSTON, TX 772771342			PROGRAMS THAT BUILD MEN OF	
			CHARACTER THROUGH MUSIC	

Total.

3а

HOUSTON BOYCHOIRPO BOX 271342	NONE	PC	PROVIDE FUNDING FOR	1
HOUSTON, TX 772771342			PROGRAMS THAT BUILD MEN OF	
			CHARACTER THROUGH MUSIC	

30310N BOTCHOIRFO BOX 271342	NONE	PC	PROVIDE FOINDING FOR	⊥,
OUSTON, TX 772771342			PROGRAMS THAT BUILD MEN OF	
			CHARACTER THROUGH MUSIC	

Form 990PF Part XV Line 3 - Gran	ts and Contributions Paic	During the	Year or Approved for Future P	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
MHMR VISIONS3840 HULEN STREET FORT WORTH, TX 76107	NONE	PC	PROVIDE FUNDING SUPPORT TO RAISE FUNDS AND FOSTER COMMUNITY SUPPORT FOR THOSE AMONG US WITH SERIOUS MENTAL HEALTH CHALLENGES AND INTELLECTUAL DISABILITIES	1,000
CONNECTING POINT OF PARK CITIES 4516 LOVERS LANE 212 DALLAS, TX 75225	NONE	PC	PROVIDE FUNDING FOR PRIVATE DAY PROGRAMS FOR ADULTS WITH DISABILITIES	1,500
THE BIRTHDAY PARTY PROJECT	NONE	PC	PROVIDE FUNDING FOR PROGRAMS THAT BRING JOY TO	500

			INTELLECTUAL DISABILITIES	
CONNECTING POINT OF PARK CITIES 4516 LOVERS LANE 212 DALLAS, TX 75225	NONE	PC	PROVIDE FUNDING FOR PRIVATE DAY PROGRAMS FOR ADULTS WITH DISABILITIES	1,50
THE BIRTHDAY PARTY PROJECT 4950 KELLER SPRINGS SUITE 470 ADDISON, TX 75001	NONE	PC	PROVIDE FUNDING FOR PROGRAMS THAT BRING JOY TO CHILDREN LIVING IN HOMELESS AND TRANSITIONAL LIVING	50

FACILITIES

3a

40,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year BEING THE BLESSING FOUNDATION INC. NONE PC PROVIDE FUNDING FOR 1,500 112 PROSPECT STREET PROGRAMS THAT PROVIDE STAMFORD, CT 06901 PEOPLE AND COMMUNITIES WITH WAYS TO CREATE, FOSTER, AND SUSTAIN OUR

BIG BROTHERS BIG SISTERS LONE
STAR
450 E JOHN CARPENTER FREEWAY
SUITE
300

NONE

IRVING. TX 75062

LEUKEMIA TEXAS

IRVING. TX 75062

Total .

3а

4925 N OCONNOR ROAD

PC PC

HIGHEST COMMON HUMAN CALLING TO BE A BLESSING FOR OTHER, ESPECIALLY THE POOREST, THE ORPHAN, THE REFUGEE, AND THOSE

PROVIDE FUNDING FOR

QUALITY ONE-TO-ONE

PROVIDE FUNDING FOR

PROGRAMS THAT FUND

LEADING-EDGE MEDICAL RESEARCH FOR A LEUKEMIA CURE AND FUND PATIENT AID TO FAMILIES IN TEXAS

PROGRAMS THAT PROVIDE

CHILDREN FACING ADVERSITY

MENTORING RELATIONSHIPS

WITH STRONG, ENDURING, AND

ENSLAVED

500

40,000

2,000

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

CHILDREN'S ASSOCIATION FOR MAXIMUM POTENTIAL PO BOX 27086 SAN ANTONIO, TX 78227	NONE	PC	PROVIDE FUNDING SUPPORT FOR PROGRAMS THAT SERVE INDIVIDUALS WITH MILD TO SEVERE DISABILITIES AND SUMMER CAMP AND SCHOOL YEAR PROGRAMS FOR NON- DISABLED SIBLINGS	500
PRESERVATION DALLAS 2922 SWISS AVENUE DALLAS, TX 75204	NONE	PC	PROVIDE FUNDING FOR PROGRAMS THAT ARE DEDICATED TO THE PRESERVATION AND REVITALIZATION OF DALLAS' HISTORIC BUILDINGS, NEIGHBORHOODS, AND PLACES	1,000
BEYOND BATTEN DISEASE FOUNDATION PO BOX 50221 AUSTIN, TX 78763	NONE	PC	PROVIDE FUNDING FOR PROGRAMS THAT WILL ERADICATE JUVENILE BATTEN DISEASE BY RAISING AWARENESS AND FUNDS TO ACCELERATE RESEARCH FOR A TREATMENT OR CURE	500
Total				40,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year HOUSTON CHILDREN'S CHARITY NONE PC PROVIDE FUNDS FOR PROGRAMS 1,000 230 WESTCOTT SUITE 202 DEDICATED TO IMPROVING THE HOUSTON, TX 77007 QUALITY OF LIFE FOR GREATER HOUSTON'S UNDERPRIVILEGED. ABUSED AND DISABLED CHILDREN WHO HAVE BEEN OTHERWISE LEFT BEHIND

TURTLE CREEK RECOVERY CENTER 2707 ROUTH STREET DALLAS, TX 75201		PC	PROVIDE FUNDS FOR RESIDENTIAL TREATMENT PROGRAM IN NORTH TEXAS THAT IS FULLY DEDICATED TO SERVING ADULTS WHO HAVE THE CO-OCCURRING DISORDERS OF SEVERE MENTAL ILLNESS AND ALCOHOL OR DRUG ADDICTION	1,000
NOW I LAY ME DOWN TO SLEEP 7853 EAST ARAPAHOE COURT SUITE	NONE	PC	PROVIDE FUNDING FOR PROGRAM THAT INTRODUCES	500

			DRUG ADDICTION	
NOW I LAY ME DOWN TO SLEEP 7853 EAST ARAPAHOE COURT SUITE 2150 CENTENNIAL, CO 80112	NONE	PC	PROVIDE FUNDING FOR PROGRAM THAT INTRODUCES REMEMBRANCE PHOTOGRAPHY TO PARENTS SUFFERING THE LOSS OF A BABY WITH A FREE GIFT OF PROFESIONAL PORTRAITURE	5
Total				40,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor

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

a Paid during the year				
AMERICAN HEART ASSOCIATION - SOUTHWEST AFFILIATE 2630 WEST FREEWAY SUITE 250 FORT WORTH, TX 76102	NONE	PC	PROVIDE FUNDING FOR PROGRAMS THAT HELP FUND INNOVATIVE RESEARCH, ADVOCACY, AND PATIENT SUPPORT UNTIL NO MORE LOVED ONES ARE LOST TO	2,000

40,000

		THE THE STORY OF THE STROKE	
		HEART DISEASE AND STROKE	
		LOVED ONES ARE LOST TO	1
		SUPPORT UNTIL NO MORE	
FORT WORTH, IX 76102		ADVOCACY, AND PATIENT	1

efile GRAPHIC print - [OO NOT PROCESS	As Filed Data -				DLN: 93491060006039		
Schedule B		Schedu	ule of Contributo	ors		OMB No 1545-0047		
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Information a	about Schedule B (F	► Attach to Form 990, 990-EZ, or 990-PF Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.					
Name of the organizat WEAVER AND TIDWELL P		V			Employer id	dentification number		
Organization type (che	eck one)				20-8574509			
	,							
Filers of:	Section:							
Form 990 or 990-EZ	☐ 501(c)() (enter number) c	organization					
	☐ 4947(a)(1) nonexempt chai	ritable trust not treated a	is a private founda	tion			
	☐ 527 politi	ical organization						
Form 990-PF	✓ 501(c)(3)) exempt private fo	undation					
	☐ 4947(a)(4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3)	501(c)(3) taxable private foundation						
			PF that received, during complete Parts I and II S					
Special Rules								
under sections 5 received from ai	509(a)(1) and 170(b)	(1)(A)(vi), that che luring the year, tota	g Form 990 or 990-EZ th cked Schedule A (Form al contributions of the gro plete Parts I and II	990 or 990-EZ), P	art II, line 13,	16a, or 16b, and that		
during the year,	total contributions o	f more than \$1,000	or (10) filing Form 990 Dexclusively for religious animals Complete Part	s, charitable, scien				
during the year, If this box is che purpose Don't o	contributions exclusecked, enter here the complete any of the p	sively for religious, total contributions parts unless the G	or (10) filing Form 990 or charitable, etc., purpose is that were received duri eneral Rule applies to the or more during the year	s, but no such con ng the year for an nis organization be	itributions tota exclusively re cause it recei	aled more than \$1,000 eligious, charitable, etc , ived <i>nonexclusively</i>		
990-EZ, or 990-PF), but	t it must answer "No	o" on Part IV, line 2	ile and/or the Special Ru t, of its Form 990, or che at it doesn't meet the filin	ck the box on line	H of its			
For Paperwork Reduction of for Form 990, 990-EZ, or 99		tructions	Cat No 30613X	Schedu	ıle B (Form 990	, 990-EZ, or 990-PF) (2017)		

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Page 2 Name of organization Employer identification number WEAVER AND TIDWELL PRIVATE FOUNDATION 20-8574509 Part I Contributors (See instructions) Use duplicate copies of Part I if additional space is needed (d) (a) (b) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 WEAVER AND TIDWELL LLP Person **Payroll** 2821 W 7TH STREET SUITE 700 \$ 40,000 Noncash FORT WORTH, TX76107 (Complete Part II for noncash contributions) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (d) (b) (C) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (a) (c) (d) (b) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person **Payroll** \$ Noncash (Complete Part II for noncash contributions)

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