Form 990-PF

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. Department of the Treasury Internal Revenue Service 2017

101	calei	idar year 2017 or tax year beginning OCT	1, 4011	, and ending	SEP 30, ZUI8	
Na	ame o	f foundation			A Employer identification	number
			3.0	1		
		. & E.B. MONCRIEF FOUND			75-6036329	<u> </u>
		and street (or P.O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
		COMMERCE ST.			(817) 336-	7236
		own, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is p	ending, check here
_1	<u> POR</u>	T WORTH, TX 76102				
G	Check	call that apply: Initial return		ormer public charity	D 1. Foreign organizations	s, check here
		Final return	Amended return		2. Foreign organizations me	ecting the 85% test.
_		Address change	Name change		2. Foreign organizations me check here and attach co	emputation .
H	_	type of organization: X Section 501(c)(3) ex		04	E If private foundation sta	
			Other taxable private founda		under section 507(b)(1)	(A), check here . \triangleright
		arket value of all assets at end of year J Accounti	-	Accrual	F If the foundation is in a	
-		Part II, col. (c), line 16)	ther (specify)		under section 507(b)(1)	(B), check here
	<u>-\$</u>	434,129. (Part I, colur		S.)		141 -
P	art I	Analysis of Revenue and Expenses (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	(d) Disbursements for charitable purposes
_			exhelises her nooks	income	income	(cash basis only)
<u>o</u>	1	Contributions, gifts, grants, etc., received]		
2019	2	Check X If the foundation is not required to attach Sch. B	404			g
-	3	Interest on savings and temporary cash investments	424.	424.		Statement 1
ωz. 	4	Dividends and interest from securities.				
MAR 2	1 .	Gross rents				
₹	6	Net rental income or (loss)		<u> </u>		
<u>_</u> •	23	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all				<u> </u>
7	[_b	assets on line 6a				
CAMPED	7	Capital gain net income (from Part IV, line 2)		0.		
* 7	8	Net short-term capital gain				
$\stackrel{\checkmark}{\sim}$	9	Income modifications Gross sales less returns and allowances				
Š	1 .					-
		Less Cost of goods sold				
	l l	Gross profit or (loss)	4,250.	0.		Statement 2
	111	Other income Total. Add lines 1 through 11	4,674.	424.	0.	Statement 2
_	13	Compensation of officers, directors, trustees, etc.	0.	0.	0.	0.
	14	Other and successful and success		0.	<u> </u>	
	15	Pension plans, employee benefits		-		
S.		Legal fees	r		-	
V.		Accounting fees	K	ECEIVED		
Fxnen		Other professional fees	90 J 27.1.	70		
ē.	17	Interest		AN 1 4 2019 O		
÷	18	Taxes Stmt 3	271	60	0.	0.
Administrative	19	Depreciation and depletion	0(SDEN LIT		
2	20	Occupancy		PUEN, UI		
Ą	21	Travel, conferences, and meetings	 			
, Due	22	Printing and publications				
n C	23	Other expenses			 	
	24	Total operating and administrative				
Operating		eynenses Add lines 13 through 23	271.	0.	0.	0.
Č	25	Contributions, gifts, grants paid	491,200.		<u> </u>	491,200.
	26	Total expenses and disbursements.				
		Add lines 24 and 25	491,471.	0.	0.	491,200.
_	27	Subtract line 26 from line 12:				
	i	Excess of revenue over expenses and disbursements	<486,797.	>		
	1	Net investment income (if negative, enter -0-)		424.		
	1	Adjusted net income (if negative, enter -0-)			0.	

Par	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of ye	
Par	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	891,012.	404,177.	404,177.
2	Savings and temporary cash investments			
3	Accounts receivable ► 2,749.			-
1	Less: allowance for doubtful accounts	2,711.	2,749.	2,749
4	Pledges receivable ►			
1	Less: allowance for doubtful accounts			
5	Grants receivable			
le				
	disqualified persons			
7	Other notes and loans receivable			
]	Less: allowance for doubtful accounts ▶			
2 8				
9 9	Prepaid expenses and deferred charges			
ć 10	a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
- 1	c Investments - corporate bonds			
	Investments - land, buildings, and equipment, basis			
-] ' '	Less accumulated depreciation			
12	Investments mortanas lesses			
13	Investments - other			
	Land, buildings, and equipment basis			
'`	Less accumulated depreciation			
15		27,203.	27,203.	27,203
1	Total assets (to be completed by all filers - see the	21,203.	21,203.	21,203
10		920,926.	434,129.	434,129
-	instructions. Also, see page 1, item I)	940,940.	434,149.	434,143
17				
18				
ខ្លួ 19	· · · · · · · · · · · · · · · · · · ·			
20 21 21				
7 I				
22	Other liabilities (describe >)			
	Table Pakitistan (add lines 47 Absorb 00)	١		
23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here	0.	0.	
	•			
<u> </u>	and complete lines 24 through 26, and lines 30 and 31.	ا ممر	424 100	
29	Unrestricted	920,926.	434,129.	
25				
26			<u> </u>	
5	Foundations that do not follow SFAS 117, check here			
5	and complete lines 27 through 31.			
2 27	· · · · · · · · · · · · · · · · · · ·			
24 25 26 27 28 29 30 30 30 30 30 30 30 30 30 30 30 30 30	· · · · · · · · · · · · · · · · · · ·			
5 29	· · · · · · · · · · · · · · · · · · ·			
30	Total net assets or fund balances	920,926.	434,129.	
1				
31	Total liabilities and net assets/fund balances .	920,926.	434,129.	
Par	t III Analysis of Changes in Net Assets or Fund Ba	lances		
Tot	al net assets or fund balances at beginning of year - Part II, column (a), line 30)		
(m	ust agree with end-of-year figure reported on prior year's return)		1	920,926
	er amount from Part I, line 27a	•	2	<486,797
	ner increases not included in line 2 (itemize)	•	3	0
	d lines 1, 2, and 3		4	434,129
	creases not included in line 2 (itemize)		5	0
	al net assets or fund balances at end of year (line 4 minus line 5) - Part II. colu	ımn (h) line 30	6	434.129

75-6036329

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Form 990-PF (2017)

Form 990-PF (2017) W.A. & E.B. MONCRIEF FOUNDATION

See the Part VI instructions.

w VIII Evalas Tay Donad an Incontract Income /^ti	ATION		7 5 0 0	<u> 136329</u>		Page 4
rt VI Excise Tax Based on Investment Income (Section			1948 - s	ee instru	ction	<u>15)</u>
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 letter	er if necessary-see instru	ctions)				
Domestic foundations that meet the section 4940(e) requirements in Part V, check it	nere 🕨 🗓 and enter 1	ı%	_1 _			4.
of Part I, line 27b		}				
All other domestic foundations enter 2% of line 27b. Exempt foreign organizations,	enter 4% of Part I, line 12,	col. (b).	1 1			
Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations	only; others, enter -0-)		2			0.
Add lines 1 and 2		• ••	3			4.
Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations	only; others, enter -0-)		4			0.
Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter-		• •	5			4.
Credits/Payments:	• • • • •					
2017 estimated tax payments and 2016 overpayment credited to 2017	6a	0.				
Exempt foreign organizations - tax withheld at source	6b	0.	1			
Tax paid with application for extension of time to file (Form 8868)	6c	0.	1			
Backup withholding erroneously withheld	6d	0.	1			
Total credits and payments. Add lines 6a through 6d		<u> </u>	1 ,			0.
Enter any penalty for underpayment of estimated tax. Check here if Form 222	 N in attached		8			0.
	o is attactivo					4
Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			9			4.
Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount over	rpaio	المراجع الما	10			
Enter the amount of line 10 to be: Credited to 2018 estimated tax rt VII-A Statements Regarding Activities		Refunded -	11			
					Yes	No
During the tax year, did the foundation attempt to influence any national, state, or lo	cal legislation or did it parti	cipate or intervene	: IU		res	
any political campaign?		••••		1a_		X
Did it spend more than \$100 during the year (either directly or indirectly) for politica			iition	. 1b		<u> </u>
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	copies of any materials pul	olished or			1	
distributed by the foundation in connection with the activities.				1 1	1	
				1 1		
Did the foundation file Form 1120-POL for this year?				10		<u>X</u>
Enter the amount (if any) of tax on political expenditures (section 4955) imposed du				1c		X
Enter the amount (if any) of tax on political expenditures (section 4955) imposed du		 0.		_ 1c		X
Enter the amount (if any) of tax on political expenditures (section 4955) imposed du (1) On the foundation. \$	anagers. > \$			1c		X
Enter the amount (if any) of tax on political expenditures (section 4955) imposed du (1) On the foundation. \$	anagers. > \$			_ 1c		X
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Enter the amount (if any) of tax on political expenditures (section 4955) imposed du (1) On the foundation. \$\int 0.\ (2) On foundation menter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0.\ \ Has the foundation engaged in any activities that have not previously been reported if "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its gove bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change Did the foundation have unrelated business gross income of \$1,000 or more during if "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the fireness of section 508(e) (relating to sections 4941 through 4945) sate. By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no more main in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes Enter the states to which the foundation reports or with which it is registered. See in TX If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF.	anagers. s	n foundation of incorporation, of incorporation	or N/A	3 4a 4b 5	Х	X X
Enter the amount (if any) of tax on political expenditures (section 4955) imposed du (1) On the foundation. \$	anagers. s expenditure tax imposed of to the IRS? erning instrument, articles les the year? instructions that constructions that constructions. to the Attorney General (or to the to t	of incorporation, of incorpora	N/A	3 4a 4b 5	$\overline{}$	X X
Has the foundation engaged in any activities that have not previously been reported If "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its gov bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change Did the foundation have unrelated business gross income of \$1,000 or more during If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during If "Yes," attach the statement required by General Instruction T. Are the requirements of section 508(e) (relating to sections 4941 through 4945) sat By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no moremain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes Enter the states to which the foundation reports or with which it is registered. See in TX If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF 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	expenditure tax imposed of to the IRS? erning instrument, articles les the year? instructions that constructions that constructions.	of incorporation, of incorpora	N/A	2 3 4a 4b 5	Х	X X
Enter the amount (if any) of tax on political expenditures (section 4955) imposed du (1) On the foundation. \$\int 0.\ (2) On foundation menter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0.\ \ Has the foundation engaged in any activities that have not previously been reported if "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its goven bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change Did the foundation have unrelated business gross income of \$1,000 or more during if "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the "Yes," attach the statement required by General Instruction T. Are the requirements of section 508(e) (relating to sections 4941 through 4945) sate. By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no material in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes Enter the states to which the foundation reports or with which it is registered. See in TX If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF of each state as required by General Instruction G? If "No," attach explanation	expenditure tax imposed of to the IRS? erning instrument, articles les the year? instructions that constructions that constructions.	of incorporation, of incorpora	N/A	2 3 4a 4b 5	Х	X X

	The A claim of the continued of the cont			
	·		Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	ĺ	9	
	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		<u>X</u> _
	Website address ► N/A	225		
14		336	<u>-72</u>	32
	Located at ▶ 950 COMMERCE ST., FORT WORTH, TX ZIP+4 ▶76	102		
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		/A Yes	NI
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,	$\overline{}$	res	
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
Da	foreign country ► Int VII-B Statements Regarding Activities for Which Form 4720 May Be Required	L	1	
Га		Г	Vaal	No
4-	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	NO
ıa	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? Yes X No			
			}	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			
		ÌÌ)	
			[
	(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)? Yes X No		}	
	· · · · · · · · · · · · · · · · · · ·	i i		
	(6) Agree to pay money or property to a government official? (Exception, Check "No"		l	
	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.) Yes X No			
_		}		
Đ	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 N/A	45		
	. —	1b		
_	Organizations relying on a current notice regarding disaster assistance, check here	1 1	-	
Ü	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?	ا ۱۰		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	10		
2	defined in section 4942(j)(3) or 4942(j)(5)):	1 1		
9	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		- 1	
•	before 2017?	1 1	1	
	if "Yes," list the years \(\bigs_{		{	
h	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		Ì	
	statement - see instructions.)	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.			
_		1 1		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		- [
	during the year?			
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		ļ	
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2017.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		х
_				

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Form 990-PF (2017) W.A. & E.B. MONCRIEF FOU Part VII-B Statements Regarding Activities for Which I			75- <u>60363</u>	29	Page 6
	Form 4720 Iviay be r	required (contin	ued)	Ves	No
 5a During the year, did the foundation pay or incur any amount to: (1) 'Carry on propaganda, or otherwise attempt to influence legislation (section) (2) Influence the outcome of any specific public election (see section 4955); or 			es X No	103	140
any voter registration drive? (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., organizatio 4945(d)(4)(A)? See instructions (5) Provide for any purpose other than religious, charitable, scientific, literary, 			es X No		
the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit		Ye	es X No		
section 53.4945 or in a current notice regarding disaster assistance? See instructions relying on a current notice regarding disaster assistance, check leading the contract of the contract o	uctions		N/A	5b	<u> </u>
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi expenditure responsibility for the grant?	rom the tax because it mainta		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				ļ
a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a p		🗀 Ye	es X No	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			es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors		nagers, Highl	7		
1 List all officers, directors, trustees, and foundation managers and t			(n		
(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) Ext account allowa	ense , other nces
	PRESIDENT, FO	UNDATION	MGR		
950 COMMERCE ST. FORT WORTH, TX 76102	1.00	0.	0.		0.
	VICE PRESIDEN		<u> </u>		
950 COMMERCE ST.	TOD TREDIDEN				
FORT WORTH, TX 76102	1.00	0.	0.		0.
	SECRETARY / T	REAS.			
950 COMMERCE ST.					
FORT WORTH, TX 76102	1.00	0.	0.		0.
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to		
(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
NONE					
			-		
			.,		
Total number of other employees paid over \$50,000			•		0

Form 990-PF (2017) W.A. & E.B. MONCRIEF FOUNDATION		5036329 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
	 	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers product	Unformation such as the	Expenses
	,u, c.u.	
1 <u>N/A</u>		
2		
<u> </u>		
3		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program related investments made by the foundation during the tax year on line	s 1 and 2.	∧mount
1 <u>N/A</u>		
		
All other program-related investments. See instructions.		<u> </u>
An other program-related investments. See instructions.		
· ————————————————————————————————————		

0 . Form **990-PF** (2017)

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions.)
1.	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a		1a	0.
b	Average of monthly cash balances	1b	683,963.
C	Fair market value of all other assets	1c	27,203.
d	Total (add lines 1a, b, and c)	1d	711,166.
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	711,166.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	10,667.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	700,499.
6	Minimum investment return. Enter 5% of line 5	6	35,025.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations ar	d certain	
	foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	35,025.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c _	4.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	35,021.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	35,021.
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, line 1	7	35,021.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	491,200.
þ	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 charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	491,200.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	4.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	491,196.
	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.	ualifies for	the section

Form **990-PF** (2017)

Part XIII Undistributed Income (see instructions)

	(a)	(b)	(c)	(d)
1 Distributable amount for 2017 from Part VI	Corpus	Years prior to 2016	2016	2017
1 Distributable amount for 2017 from Part XI, line 7				35,021.
2 Undistributed income, if any, as of the end of 2017				33,021.
a Enter amount for 2016 only			0.	
b Total for prior years:				
y rotal for prior yours.		0.	i	
3 Excess distributions carryover, if any, to 2017:				
a From 2012 541,416.				
b From 2013 668, 227.				
c From 2014 247, 904.	•			
d From 2015 337, 919.	}			
e From 2016 237, 956.	Ì			
f Total of lines 3a through e	2,033,422.			
4 Qualifying distributions for 2017 from				
Part XII, line 4: ► \$ 491, 200.				
a Applied to 2016, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount				35,021.
e Remaining amount distributed out of corpus	456,179.			
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	2,489,601.			
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				0.
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	541,416.			
9 Excess distributions carryover to 2018.		ļ		
Subtract lines 7 and 8 from line 6a	1,948,185.			
10 Analysis of line 9:			:	
a Excess from 2013 668, 227.			!	
b Excess from 2014 247,904.		}		
c Excess from 2015 337, 919.		ļ		
d Excess from 2016 237, 956.				
_e Excess from 2017 . 456,179.				<u></u> _

Part XIV Private Operating F	E.B. MONCRI			75-60.	36329 Page 10
			I-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for		- *****		14040(1/0) []40	101/15
b Check box to indicate whether the foun	Tax year	ig toungation described		<u> </u>	42(j)(5)
2 a Enter the lesser of the adjusted net	(a) 2017	(b) 2016	Prior 3 years	(d) 2014	(a) Total
income from Part I or the minimum	(a) 2011	(0) 2010	(c) 2015	(0) 2014/	(e) Total
investment return from Part X for			•		
each year listed				 / 	
b 85% of line 2a				 / 	
c Qualifying distributions from Part XII,				/ /	
line 4 for each year listed			 		
d Amounts included in line 2c not		ļ			
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			 /	 	
alternative test relied upon:					
a "Assets" alternative test - enter:	1	/			
(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	j			İ	
listed .			ļ <u></u>		
c "Support" alternative test - enter:	ļ			ł	
(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	,	Y			
and 5 or more exempt organizations as provided in	/				
section 4942(¡)(3)(B)(װ)					
(3) Largest amount of support from	•				
an exempt organization			<u> </u>	 	
(4) Gross investment income		A. Alaia	:	- h l &5 000	
Part XV Supplementary Info			if the foundation	n nad \$5,000 or mo	re in assets
					
 Information Regarding Foundation List any managers of the foundation wh 	-	than 20% of the total cont	ributions recoved by th	a foundation before the elec-	o of any tay
year (but only if they have contributed i	nore than \$5,000). (See s	ection 507(d)(2).)	andulions received by th	כ וויטוויטמווטוו טכוטו כ נווכ כוט	c or any tax
W.A. MONCRIEF JR.					
b List any managers of the foundation whether entity) of which the foundation has			(or an equally large port	ion of the ownership of a pa	rtnership or
None	•				
2 Information Regarding Contribut	ion, Grant, Gift, Loan,	Scholarship, etc., Pr	rograms:		-
Check here ▶ ☐ if the foundation			_	not accept unsolicited reque	ests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	iber or email address of th	ne person to whom applic	cations should be addre	ssed:	
W.A. MONCRIEF JR.					
950 COMMERCE ST., FO	RT WORTH, T	X 76102			
b The form in which applications should			hould include:		
WRITTEN APPLICATIONS		<u> </u>			
c Any submission deadlines: NONE					
d Any restrictions or limitations on award	s, such as by geographica	al areas, charitable fields,	, kınds of institutions, or	other factors:	
CHARITABLE PURPOSES					

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient a Paid during the year NONE FORT WORTH ZOO PUBLIC GENERAL OPERATIONS 10,000. KERA NONE PUBLIC GENERAL OPERATIONS 200, UNIVERSITY OF TEXAS AT ARLINGTON NONE PUBLIC GENERAL OPERATIONS BRITISH STUDIES 60,000. MODERN ART MUSEUM OF FORT WORTH NONE PUBLIC GENERAL OPERATIONS 1,000. MOUNTAIN STATES LEGAL FOUNDATION NONE PUBLIC GENERAL OPERATIONS 500 See continuation sheet(s) **▶** 3a Total 491 200. b Approved for future payment None <u>Total</u>

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	(a) Business	d business income (b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code	711100111	code	Alloun	- Idiotion modific
<u>a</u>	 		├—		
b	} 		 		
c					
d	 				
e	 				
1	}				
g Fees and contracts from government agencies	 		<u> </u>		
2 Membership dues and assessments	 				
3 Interest on savings and temporary cash	1		1 4	424	
investments	ļ		14	424.	
4 Dividends and interest from securities	 		 -		
5 Net rental income or (loss) from real estate:	ļ				
a Debt-financed property	-		-		
b Not debt-financed property	ļ —				
6 Net rental income or (loss) from personal	}				
property					
7 Other investment income	 				
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events	 		<u> </u>		 _
10 Gross profit or (loss) from sales of inventory			<u> </u>		
11 Other revenue:	00000	4 250			
a LEASE BONUS INCOME	900099	4,250.			
b MISC INCOME	900099				
<u> </u>					
d	 				
e	 	4,250.		424.	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)				12	
(See worksheet in line 13 instructions to verify calculations.)		•	•	13	<u> </u>
					
Part XVI-B Relationship of Activities	to the Acco	emplishment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which inco	me is reported in	n column (e) of Part XVI-A	contrib	outed importantly to the accom	inlishment of
the foundation's exempt purposes (other than			00116112	outed importantly to the accom-	phoninant of
					
			·		
					
				·	
				, , , , , , , , , , , , , , , , , , , 	
					
					
					

Form 990-PF (2017) W.A.	& E.BMC	NCRIEF	FOUNDATION		75-603	6329	Page 13
Part XVII	Information Re	egarding Tran			and Relation	ships With Nonchar		
1 Did the o	Exempt Organ		of the follows	ng with any other organizati	ion described in s	ection 501(c)	T V	es No
				g to political organizations?		scholl 50 f(c)	F	00 110
	s from the reporting found			•	•		1 1	
(1) Casl	• •			g			1a(1)	_ x
	r assets		• •		•	•	1a(2)	X
	nsactions:		••	•• •				
(1) Sale	s of assets to a noncharita	ble exempt organiza	tion				16(1)	X
	hases of assets from a no						1b(2)	X
(3) Ren	tal of facilities, equipment,	or other assets					1b(3)	X
(4) Rein	nbursement arrangements				•		1b(4)	X
(5) Loai	ns or loan guarantees						1b(5)	X
(6) Perf	ormance of services or me	embership or fundrai	sing solicitatio	ons .			1b(6)	X
	of facilities, equipment, ma						1c	X
d if the ans	swer to any of the above is	"Yes," complete the	following sche	dule. Column (b) should a	lways show the fa	ir market value of the goods, o	other asset	S,
or servic	es given by the reporting f	oundation. If the fou	ndation receiv	ed less than fair market val	ue in any transact	ion or sharing arrangement, s	how in	
	d) the value of the goods,					·····		
(a) Line no	(b) Amount involved	(c) Name o		e exempt organization	(d) Descrip	tion of transfers, transactions, and	sharing arran	gements
			N/A					
								
								
							 	
						· · · · · · · · · · · · · · · · · · ·		
								
				_				
								
		 		· 	 -			
								
		 -						
2a Is the fou	indation directly or indirec	tly affiliated with, or	related to, one	or more tax-exempt organ	 izations described	i		
ın sectioi	n 501(c) (other than sectio	n 501(c)(3)) or in se	ction 527?				Yes	X No
b If Yes," o	complete the following sch			 -				
	(a) Name of org	anization		(b) Type of organization		(c) Description of relations	hip	
	N/A							
					ļ			
					 			
				<u> </u>	<u> </u>	 		
1 1	r penalties of perury, I declare pellef, 1715 true correct, and cor	that I have examined the	streturn, includir eparer (other tha	ig accompanying schedules and n taxpayer) is based on all inform	d statements, and to mation of which prep	eres han only knowledge (VIZ)	the IRS disc	
Sign Here	Marino	more D		1			rn with the p wn below? S	ce instr
						└	Yes	L No ∣
	nature of officer or trustee		D	Date	Title	Charle L STILL		
	Print/Type preparer's na	11118	Preparer's s	ignature	Date	Check if PTIN		
Paid			1		1	self- employed		
			<u> </u>		<u> </u>	<u> </u>		
Preparer Use Only	Firm's name					Firm's EIN 🕨		
OSE ONLY				·				
	Firm's address							
	1		_			Phone no.		DC :
						Fo	orm 990-	PF (2017)

Part XV Supplementary Informati	E.B. MONCRIEF I	FOUNDATION	<u> 75-60</u>	36329
3 Grants and Contributions Paid During the	·			<u> </u>
Recipient	If recipient is an individual.	- I		
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
PRESBYTERIAN NIGHT SHELTER	. NONE	PUBLIC	GENERAL OPERATIONS	
•				25,000
SHRINE CIRCUS FUND	NONE ,	PUBLIC	GENERAL OPERATIONS	2,500
SHRINERS HOSPITAL FOR CHILDREN	NONE	PUBLIC	GENERAL OPERATIONS	25,000
		1	,	
ST ANDREWS EPISCOPAL CHURCH	NONE	PUBLIC	GENERAL OPERATIONS	16,000
UT SOUTHWESTERN MEDICAL CENTER	NONE	PUBLIC	GENERAL OPERATIONS	100,000
SAVING HOPE FOUNDATION	NONE	PUBLIC	GENERAL OPERATIONS	50,000
SOUTHWEST MEDICAL FOUNDATION	NONE	PUBLIC	GENERAL OPERATIONS	50,000
BPCA	NONE	PUBLIC	GENERAL OPERATIONS	1,000
PEXAS SCOTTISH RITE HOSPITAL	NONE	PUBLIC	GENERAL OPERATIONS	25,000
ID ANDERSON CANCER CENTER	NONE	PUBLIC	GENERAL OPERATIONS	
	1_	l	I	125,000

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** W.A. & E.B. MONCRIEF FOUNDATION 75-6036329 Organization type (check one): Filers of: Section: Form 990 or 990-EZ J 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 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 J 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

Employer identification number

W.A. & E.B. MONCRIEF FOUNDATION

75-6036329

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
1	W.A. MONCRIEF JR. 950 COMMERCE ST FORT WORTH, TX 76102		Person X Payroll
(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
		s	Person Payroll 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

Employer identification number

W.A. & E.B. MONCRIEF FOUNDATION

75-6036329

(a) No. from Part I (a) No. (b) The part I (a) No. (b) The part I (a) No. (b) The part I (b) Description of noncash property given	if additional space is needed.	
(a) No. from Part I (a) No. (b) Description of noncash property given (a) No. from Part I (a) No. from Part I (b) Description of noncash property given Description of noncash property given (b) Description of noncash property given Description of noncash property given (a) No. from Part I (b) Description of noncash property given Description of noncash property given (a) No. from Description of noncash property given Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
No. (b) Description of noncash property given Description of noncash property gi	 \$	
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	- - - - \$	

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w.A. &	E.B. MONCRIEF FOUNDATI	ON	75-6036329			
Part III	the year from any one contributor. Complete co	lumns (a) through (e) and the follow	in section 501(c)(7), (8), or (10) that total more than \$1,000 for			
	completing Part III, enter the total of exclusively religious,	charitable, etc., contributions of \$1,000 or l	less for the year (Enter this info once) > \$			
(a) No.	Use duplicate copies of Part III if additional	space is needed.				
from Part I	(b) Purpose of gift	(c) Use of gift	ift (d) Description of how gift is held			
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	(e) Transfer of gift					
-	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
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(a) No.						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
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Ì		(e) Transfer of gift				
	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee			
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(a) No. from	415		400 44			
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
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		(e) Transfer of gift				
<u> </u>	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee			
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Part I	(L), L), EO, CO, CO, CO, CO, CO, CO, CO, CO, CO, C		(-)			
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\vdash	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee			
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Form 990-PF Interest on Savi	ings and Te	mporary	Cash	Investments	Statement	1
Source	Rev	(a) renue Books		(b) Investment Income	(c) Adjusted Net Incom	
BANK OF AMERICA		424.		424.	424.	
Total to Part I, line 3		424.		424.	4	24.
Form 990-PF	Other	Income			Statement	2
Description		(a) Revent Per Boo		(b) Net Invest- ment Income	_	
LEASE BONUS INCOME	_		4,250.	0	•	0.
Total to Form 990-PF, Part I,	line 11 =		4,250.	0	•	0.
Form 990-PF	Та	axes			Statement	3
Description	(a) Expenses Per Books	Net I		(c) Adjusted Net Incom		
FEDERAL INCOME TAXES PROPERTY TAXES	244		0		0.	0.
To Form 990-PF, Pg 1, ln 18	27:		0		0.	0.
Form 990-PF	Other Assets			Statement 4		
Description				l of Year Fair Market ook Value Value		t
NON PRODUCING OIL & GAS ROYAL	 	27.20	27,203. 27,203.		27,203.	
MON EVODOCING OID & GV2 KOIVI	11110	_,,_,	•	_ , , _ , _ ,		