# EXTENDED TO AUGUST 15, 2018 Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No. 1545-0052

Do not enter social security numbers on this form as it may be made public.

		venue Service ► Information about Form			· · · · · · · · · · · · · · · · · · ·	Open to Public Inspection
For	calen	dar year 2016 or tax year beginning OCT	1, 2016	, and ending	SEP 30, 2017	1
		foundation			A Employer identificatio	n number
		ISIANA-MISSISSIPPI-WEST				
		ANIS DISTRICT FOUNDATIO			72-0905792	2
		nd street (or P.O. box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
5	<u>25</u>	3-B DIJON DRIVE			225-769-92	233
City	or to	own, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is	pending, check here
_ <u>B</u>	AT	ON ROUGE, LA 70808-934	3		ļ	
G (	Check	all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organization	s, check here
		Final return	Amended return			
		X Address change	Name change		Foreign organizations m check here and attach c	eeting the 85% test, omputation
H_ (	heck	type of organization: X Section 501(c)(3) ex	empt private foundation		E If private foundation sta	atus was terminated
L	_l Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation	under section 507(b)(1	
I Fa	ıir ma	arket value of all assets at end of year   J   Accounti	ng method: X Cash	Accrual	F If the foundation is in a	60-month termination
			her (specify)		under section 507(b)(1	
	\$	734,607. (Part I, colu	mn (d) must be on cash i	basis.)		.,
Pa	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 income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	54,521.		N/A	
	2	Check X If the foundation is not required to attach Sch. B				
	3	interest on savings and temporary cash investments	3.	3.		STATEMENT 1
	4	Dividends and interest from securities	12,390.	12,390.		STATEMENT 2
	5a	Gross rents				
		Net rental income or (loss)	,			
4	}	Net gain or (loss) from sale of assets not on line 10				
ä	b	Gross sales price for all assets on line 6a				
Revenue	7	Capital gain net income (from Part IV, line 2)		0.		
ď	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns				·
	b	Less; Cost of goods sold				
	С	Gross profit or (loss)				
	11	Other income	16,497.	0.		STATEMENT 3
	12	Total. Add lines 1 through 11	83,411.	12,393.		
	13	Compensation of officers, directors, trustees, etc.	0.	0.		0.
	14	Other employee salaries and wages				
"	15	Pension plans, employee benefits				
Ses	16a	Legal fees				
and Administrative Expenses		Accounting fees STMT 4	950.	0.		0.
Щ	С	Other professional fees				
five	17	Interest				
tra	18	Taxes STMT 5	146.	0.		0.
inis	19	Depreciation and depletion				
핕	20	Occupancy	3,200.	0.		0.
Υþ	21	Travel, conferences, and meetings				
a	22	Printing and publications				
Operating	23	Other expenses STMT 6	14,756.	0.		0.
<sub>3</sub> rat	24	Total operating and administrative	40.000	_		_
ď		expenses. Add lines 13 through 23	19,052.	0.		0.
_	25	Contributions, gifts, grants paid	109,226.			109,226.
	26	Total expenses and disbursements.	100 000	_		
	07	Add lines 24 and 25	128,278.	0.		109,226.
		Subtract line 26 from line 12:	.44 0.65			
		Excess of revenue over expenses and disbursements	<44,867.			
	D	Net investment income (if negative, enter -0-)	!	12,393.	i	į.

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2016)

c Adjusted net income (if negative, enter -0-).

N/A

For	m 99	00-PF (2016) KIWANIS DISTRICT FOUNDAT	ION, INC.		0905792 Page 2
В	art	II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only.	Beginning of year	End of	
	arı	column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	85,307.	20,018.	20,018.
	2	Savings and temporary cash investments	6,989.	7,215.	7,215.
	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 ▶			
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ä	10a	Investments - U.S. and state government obligations			
		Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment: basis			
	'	Less: accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 7	622,926.	707,374.	707,374.
	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 ()	715,222.	734,607.	734,607.
	17	Accounts payable and accrued expenses	, 40, 44	75170071	7027077
	18	Grants payable			•
'n	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ΙĢ	21	Mortgages and other notes payable			•
Ë	ł	Other liabilities (describe >)			
		Otto Indumino (dodolibo			
	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.			
es	24	Unrestricted	715,222.	734,607.	
anc anc	25	Temporarily restricted	713,222.	75470076	
3ak	26	Permanently restricted		, , ,	
ğ	20	Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
Net Assets or Fund Balances	27	Capital stock, trust principal, or current funds			
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
Ass	29	Retained earnings, accumulated income, endowment, or other funds			
et/	30	Total net assets or fund balances.	715,222.	734,607.	 
z	00	Total fiet assets of fully balances.	713,222.	754,007	L .
	31	Total liabilities and net assets/fund balances	715,222.	734,607.	· 
_				734,007	
P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line (	30		
		st agree with end-of-year figure reported on prior year's return)		1	715,222.
		. ( D . I II . 67		1 1	<44,867.
3	Othe	r amount from Part I, line 27a r increases not included in line 2 (itemize)   UNREALIZED (	ΩΔΤΝ ΟΝ ΤΝΩΡΟΦ	MENTS 3	64,252.
		lines 1, 2, and 3			734,607.
		eases not included in line 2 (itemize)		5	734,007.
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (h), line 30		734,607.
<u> </u>	. 014	t dit ii, ou	\DB 1110 00	1 0 1	Form <b>990-PF</b> (2016)
					(2010)

	m 990-PF (2016) <b>KIWA</b>	SIANA-MISSISSII NIS DISTRICT FO nd Losses for Tax on h	OUNDATIO	ON, INC.	SEL	<u></u>		72-090	5792 Page 3
	(a) List and describe	e the kind(s) of property sold (e.q nouse; or common stock, 200 sh	g., real estate,	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(b) H	low acquired - Purchase - Donation	(c) Da	ite acquired ., day, yr.)	(d) Date sold (mo., day, yr.)
1a									
b	NONI	E			<u> </u>				
c	······································		***************************************						
e									
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale				) Gain or (loss olus (f) minus	
_ <u>a</u>									
<u>b</u>									
d									
е									
	Complete only for assets showing					(		s (Col. (h) gain out not less tha	
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any			Los	ses (from col. (	(h))
<u>a</u>									
_ <u>b</u>									
d									
е									
2	Capital gain net income or (net capit	tal loss) { If gain, also ento	er in Part I, line 0- in Part I, line	7 7	}	2			
3	Net short-term capital gain or (loss) If gain, also enter in Part I, line 8, co	olumn (c).	and (6):		}				
F	If (loss), enter -0- in Part I, line 8  Part V Qualification Unit	der Section 4940(e) fo	r Reduced	Tax on Ne	t Inv	3 estment l	ncome	<del></del>	
_	or optional use by domestic private for								
If c	section 4940(d)(2) applies, leave this	nart hlank							
	as the foundation liable for the sectio		mount of any ye	ear in the base p	eriod?				Yes X No
	Yes," the foundation does not qualify Enter the appropriate amount in eac				ontrios				
1			IIISU UCUONS DE	ore making any	(c)			51.1	(d)
	(a) Base period years Calendar year (or tax year beginning	in) Adjusted qualifying d	istributions	Net value of n	oncha	ritable-use ass	ets	(col. (b) di	bution ratio vided by col. (c))
	2015		50,099.			650,75			.076983
	2014		35,957.			602,55			.059674 .038594
	2013 2012		21,240. 22,995.			550,35 445,05			.051667
-	2012		32,233.			381,43			.084506
					·				
2	Total of line 1, column (d)							2	.311424
3	Average distribution ratio for the 5-y the foundation has been in existence	•		-				3	.062285
4	Enter the net value of noncharitable	-use assets for 2016 from Part X	(, line 5		,	,		4	714,156.
5	Multiply line 4 by line 3							5	44,481.
	Enter 1% of net investment income							6	124.
								7	44,605.
	Enter qualifying distributions from F							8	109,226.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

LOUISIANA-MISSISSIPPI-WEST TENNESSEE

	1990-PF (2016) KIWANIS DISTRICT FOUNDATION, INC.	72-09			age 4	
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 - Se	e instru	CHOI	15)	
1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			4	24.	
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%					
	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).				_	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			<u>0.</u>	
3	Add lines 1 and 2	3		1	24.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		<u> 1</u>	24.	
6	Credits/Payments:					
а	2016 estimated tax payments and 2015 overpayment credited to 2016					
b	Exempt foreign organizations - tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868)					
d	Backup withholding erroneously withheld 6d	-				
	Total credits and payments, Add lines 6a through 6d	7			0.	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		1	24.	
10	Overpayment, If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax	11				
	art VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	in		Yes	No	
	any political campaign?		1a		X	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition				X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish					
	distributed by the foundation in connection with the activities.		,			
c	Did the foundation file Form 1120-POL for this year?		1c		Х	
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				-	
	(1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0 .					
£	E Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		Х	
-	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, articles of incorporation, or	r	ľ			
Ū	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		Х	
4:	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?				X	
	olf "Yes," has it filed a tax return on Form 990-T for this year?		4b			
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				Х	
Ů	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		1.			
·	By language in the governing instrument, or					
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state</li> </ul>	law				
	remain in the governing instrument?		6	х		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	, , , , , , , , , , , , , , , , , , ,	7	X	-	
,	bid the foundation have at loads φο <sub>1</sub> 000 in additional attacts this during the your. If 100, 00π plots 1 are 11, 00π (ο), and 1 are 12	***********			<b>†</b>	
R:	a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶					
0,	LA		_			
1	o If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		_			
	of each state as required by General Instruction G? If "No," attach explanation		8b	X		
9	the contract of the contract o		35		<del>                                     </del>	
J	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV		9		x	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses				X	
	and any personal population of the personal during the tax years in 165, attach a sometime listing their harries and addresses		Form <b>99</b>	)-PF		

Pa	art VII-A   Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	ļ	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	ļ	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	<u> </u>
	Website address ► N/A			
14	The books are in care of ► CHARLES FORD Telephone no. ► (225)			
	Located at ► 5319-B DIDESSE DRIVE, BATON ROUGE, LA ZIP+4 ►70		<u>-01</u>	<u>69</u>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	$\cdot$
	and enter the amount of tax-exempt interest received or accrued during the year		[/A	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,		Yes	
	securities, or other financial account in a foreign country?	16	<u> </u>	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
De	foreign country  Art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
1 6		1	11/	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	-	Yes	No
18	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X No			
	(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			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after		1	
h	termination of government service, if terminating within 90 days.)  Yes X No			
U	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	١.,		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?  N/A  Organizations rehiting on a current notice regarding disaster assistance should have	1b	ļ	
^	Organizations relying on a current notice regarding disaster assistance check here			:
G	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	١.,		₹7
9	before the first day of the tax year beginning in 2016?  Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	10		X
۷	defined in section 4942(j)(3) or 4942(j)(5)):			
9	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
a	before 2016? Yes X No			
	If "Yes," list the years \(\bigs\)			
h	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.)  N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		<b> </b>	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year? Yes X No			
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2016.)  N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	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 2016?	4b		X
		rm <b>99</b>	0-PF	(2016)

623551 11-23-16

Form **990-PF** (2016)

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part, Fo	reign foun	dations, see	instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
a	Average monthly fair market value of securities		1a	665,150.
	Average of monthly cash balances		1b	<u>52,666.</u>
	Fair market value of all other assets		1c	<u>7,215.</u>
	Total (add lines 1a, b, and c)		1d	725,031.
	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	725,031.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)		4	10,875.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	F	5	714,156.
6	Minimum investment return. Enter 5% of line 5		6	35,708.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four		d certain	
	foreign organizations check here  and do not complete this part.)			
1	Minimum investment return from Part X, line 6		1	35,708.
2 a	Tax on investment income for 2016 from Part VI, line 5	124.	,	
b	Income tax for 2016. (This does not include the tax from Part VI.)			
C	Add lines 2a and 2b		2c	124.
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	35,584.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4		5	35,584.
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	35,584.
_				
	art XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
а	. , , , , , , , , , , , , , , , , , , ,		1a	109,226.
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 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	109,226.
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	124.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	109,102.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the f		ualifies for th	e section
	4940(e) reduction of tax in those years.			

Part XIII Undistributed Income (see instructions)

	(a)	/h)	(0)	(d)
	(a) Corpus	(b) Years prior to 2015	(c) 2015	(a) 2016
1 Distributable amount for 2016 from Part XI,	00.540			
line 7				35,584.
2 Undistributed income, if any, as of the end of 2016;				
a Enter amount for 2015 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011 13,332.				
b From 2012 908.				
c From 2013				
d From 2014 6,079.				
e From 2015 17,822.				
f Total of lines 3a through e	38,141.			
4 Qualifying distributions for 2016 from				
Part XII, line 4: ► \$ 109,226.			_	
a Applied to 2015, but not more than line 2a			0.	
<b>b</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.			25 504
d Applied to 2016 distributable amount	72.640			35,584.
e Remaining amount distributed out of corpus	73,642.			0.
Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			<u>U.</u>
6 Enter the net total of each column as indicated below;			•	
a Corpus. Add lines 3f, 4c, and 4e, Subtract line 5	111,783.			
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 2015. Subtract line				
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2016. Subtract	•			
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				0.
7 Amounts treated as distributions out of			•	
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2011 not applied on line 5 or line 7	13,332.			
9 Excess distributions carryover to 2017.	13,332.			
Subtract lines 7 and 8 from line 6a	98,451.			
10 Analysis of line 9:	70, 431.			
a Excess from 2012 908.				
b Excess from 2013				
c Excess from 2014 6 , 079 .				
d Excess from 2015 17,822.				
e Excess from 2016 73,642.				

623581 11-23-16

Form 990-PF (2016) KIWANIS  Part XIV Private Operating Fo		OUNDATION , . structions and Part V		N/A	U5/92 Fage
1 a If the foundation has received a ruling or o			,	44/44	
foundation, and the ruling is effective for 2					
b Check box to indicate whether the foundar	•			4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	ig iouniautori accinica	Prior 3 years		
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for	· · · · · · · · · · · · · · · · · · ·	, ,			
each year listed					
b 85% of line 2a					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter: (1) Value of all assets					
, ,					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization				İ	
(A) Cross investment income					
Part XV Supplementary Infor	mation (Comple	te this part only	y if the foundation	on had \$5,000 or m	ore in assets
at any time during the	ne year-see inst	ructions.)	•		
1 Information Regarding Foundation					
a List any managers of the foundation who		than 2% of the total co	ntributions received by t	he foundation before the clo	se of any tax
year (but only if they have contributed m					
NONE					
b List any managers of the foundation who	own 10% or more of the	he stock of a corporatio	n (or an equally large po	rtion of the ownership of a p	artnership or
other entity) of which the foundation has			·		·
NONE					
2 Information Regarding Contribution	on, Grant, Gift, Loan	, Scholarship, etc.,	Programs:		
Check here 🕨 🗶 if the foundation or	nly makes contributions	to preselected charitab	le organizations and doe	s not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc. (	see instructions) to indi	viduals or organizations	under other conditions,	complete items 2a, b, c, an	d d.
a The name, address, and telephone numb	er or e-mail address of	the person to whom ap	plications should be add	ressed:	
KEY CLUB & CIRCLE K	CONVENTION	REGISTRATI	ON COMMITTE	EE, 225-769-9	233
5319 DIDESSE DRIVE,	SUITE B, BA	ATON ROUGE,	LA 70808		
b The form in which applications should be	submitted and informa	ation and materials they	should include:		
APPLICATION FORM - I	NCLUDE HIGH	H SCHOOL /	COLLEGE TRA	ANSCRIPTS	
c Any submission deadlines:					
NONE					
d Any restrictions or limitations on awards	, such as by geographic	cal areas, charitable field	ls, kinds of institutions, o	or other factors;	
LIMITED TO KEY CLUB	- CIRCLE K	MEMBERS			

KIWANIS DISTRICT FOUNDATION, INC.

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Ye	ar or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
UNIVERSITY OF LOUISIANA AT MONROE		EDUCATIONAL	SCHOLARSHIP	
700 UNIVERSITY AVE		INSTITUTION		
MONROE, LA 71209				1,000.
CIRCLE K DISTRICT		CIVIC	GRANT	
5319-B DIDESSE DR.				
BATON ROUGE, LA 70808-6401				1,000.
			<i>'</i>	
TANGI FOOD PANTRY		CHARITABLE	GRANT	
2410 W THOMAS ST				
HAMMOND, LA 70403				5,000.
ST MARTIN COMMUNITY ACTION CENTER		CIVIC	GRANT	
2097 TERRACE RD				
ST MARTINVILLE, LA 70582				2,500.
SB-SF FOOD PANTRY		CHARITABLE	GRANT	
701 W BRIDGE ST			J.22.12	
BREAUX BRIDGE, LA 70517				2,500.
Total SEE CON	TINUATION SHE	<u> </u>	> 3a	109,226.
b Approved for future payment				
NONE				
			<b>&gt;</b> 3b	^
Total			> 30   Fr	0 . 0 orm <b>990-PF</b> (2016)

Form 990-PF (2016)  LOUISIANA-MISSI KIWANIS DISTRIC	T FOUND	ATION, INC.		72-0	905792 Page 12
Part XVI-A Analysis of Income-Produc					
Enter gross amounts unless otherwise indicated.		ousiness income	Excluded b	y section 512, 513, or 514	(e)
4 December and the management	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue;	code		code	7,11,10,21,10	
a					
b					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					<del>-</del>
investments			14	3.	
4 Dividends and interest from securities			14	12,390.	
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					
8 Gain or (loss) from sales of assets other					
than inventory			- 02	16 407	
9 Net income or (loss) from special events			03	16,497.	
<ul><li>10 Gross profit or (loss) from sales of inventory</li><li>11 Other revenue:</li></ul>					
_					
a					
b					
d					
6					
12 Subtotal. Add columns (b), (d), and (e)		C	).	28,890.	0
13 Total. Add line 12, columns (b), (d), and (e)					28,890
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities t	o the Accon	plishment of	Exempt P	urposes	
Line No. Explain below how each activity for which inco	me is reported in	column (e) of Part XV	I-A contributed	I importantly to the accomp	Dishment of
▼ the foundation's exempt purposes (other than				, , , , , , , , , , , , , , , , , , , ,	

Form **990-PF** (2016) 623621 11-23-16

Part XVII	Information Regarding Transfers To and Transactions and Relationships With No Exempt Organizations	ncharitable	)	
1 Did the or	rganization directly or indirectly engage in any of the following with any other organization described in section 501(c) of		Yes	No
	(other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
	s from the reporting foundation to a noncharitable exempt organization of:			
	1	1a(1)		Х
	r assets			Х
<b>b</b> Other tran				
(1) Sales	s of assets to a noncharitable exempt organization	1b(1)		_X_
	hases of assets from a noncharitable exempt organization		<u> </u>	X
(3) Renta	ial of facilities, equipment, or other assets	1b(3)		X
(4) Reim	nbursement arrangements	1b(4)		X
(5) Loan	ns or loan guarantees	1b(5)	ļ	X
	ormance of services or membership or fundraising solicitations			X
	of facilities, equipment, mailing lists, other assets, or paid employees		X	L
or service	swer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the g es given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrange d) the value of the goods, other assets, or services received.		iets,	
(a) Line no.	(b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transaction	ons, and sharing ar	rangeme	nts
	LA, MISS, W. TENN, DISTRICT SEE STATEMENT 9			
C	22,616.OF KIWANIS			
	undation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described n 501(c) of the Code (other than section 501(c)(3)) or in section 527?	X Yes		] No
b If "Yes," c	complete the following schedule.			
	(a) Name of organization (b) Type of organization (c) Description of r	əlationship		
LA, MIS	SS, W. TENN, DISTRICT OF SOCIAL SEE STATEMENT 10			
KIWANIS	S WELFARE			
	TAXPAYER'S			
	er penalties of perjuly, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge	May the IRS	discuss	this
Sign	belief, it is true, content and promise the Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	return with the shown below	v (see ins	er str.)?
Here	PREPARED BY DIRECTOR	X Yes	;	_l No
- HANG	MATURAL OFFICE PARTICLE Date Title			
C	Print Type man But Change OUNTANTS Preparer's signature Date Check X if	PTIN		
מי: א	BATON ROUGE, LOUISIANA self- employed			,
Paid	CHARLES R. PEVEY CHARLES R. PEVEY 03/05/18	P00103		
Preparer	Thin bland a little of the control o	2-04644	.28	
Use Only				
	Firm's address ► 8545 UNITED PLAZA BLVD NO. 200			
	BATON ROUGE, LA 70809-9982 Phone no. 22			
		Form <b>99</b>	<b>U-アド</b>	(2016)

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	0011111001011	
UDREY ALLEN	NONE	INDIVIDUAL	GRANT	
				2,000
KEY CLUB DISTRICT		civic	GRANT	
3319-B DIDESSE DR. BATON ROUGE, LA 70808-6401				3,000
(IWANIS CLUB OF DAWN BUSTERS	,	CIVIC	GRANT	
PO BOX 6211 METAIRIE, LA 70011				750
GEORGE CHARLES	NONE	INDIVIDUAL	GRANT	2,000
GEORGE CHOPLIN JR	NONE	INDIVIDUAL	GRANT	2,000
KIWANIS CLUB OF NEW ORLEANS		CIVIC	GRANT	
PO BOX 24090 NEW ORLEANS, LA 70184				35:
CHARLAR BREW	NONE	INDIVIDUAL	GRANT	2,00
SHIRLEY TONY	NONE	INDIVIDUAL	GRANT	2,00
JOESPH BOBO	NONE	INDIVIDUAL	GRANT	2,00
KIWANIS INTERNATIONAL		CIVIC	GRANTS	
3636 WOODVIEW TRACE INDIANAPOLIS, IN 46268				2,00
Total from continuation sheets			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	97,22

3 Grants and Contributions Paid During the	Year (Continuation)			
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)	show any relationship to any foundation manager or substantial contributor	recipient	Contribution	
RANDY SMITH	NONE	INDIVIDUAL	CRANT	2,000
LUDRICK HIDALGO	NONE	INDIVIDUAL	GRANT	2,000
LOUISIANA STATE UNIVERSITY L25 THOMAS BOYD HALL BATON ROUGE, LA 70803		EDUCATIONAL INSTITUTION	SCHOLARSHIP	7,50
COUISIANA TECH UNIVERSITY BOX 7924 RUSTON, LA 71272		EDUCATIONAL INSTITUTION	SCHOLARSHIP	1,00
JAN FAIRCHILD	NONE	INDIVIDUAL	GRANT	2,00
DEBBIE COE	NONE	INDIVIDUAL	GRANT	2,00
ST JUDE'S CHILDREN HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS, TN 38105		HEALTH	GRANT	50
MICHELE CROSBY	NONE	INDIVIDUAL	GRANT	2,00
RICHARD HILL	NONE	INDIVIDUAL	GRANT	2,00
UNIVERSITY OF MISSISSIPPI P.O. BOX 1848 UNIVERSITY, MS 38677		EDUCATIONAL INSTITUTION	SCHOLARSHIP	1,00

3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	Amount
OHN GROSSLEY	NONE	INDIVIDUAL	GRANT	2,00
ILLIAN GROSSLEY	NONE	INDIVIDUAL	GRANT	2,00
OLL MEDICAL CORP O.O. BOX 27028 NEW YORK, NY 10087		HEALTH	GRANT	3,00
UNIVERSITY OF TEXAS 1.10 INNER CAMPUS DRIVE AUSTIN, TX 78705		EDUCATIONAL INSTITUTION	SCHOLARSHIP	1,00
SEORGETOWN UNIVERSITY 3700 O ST WASHINGTON, DC 20057		EDUCATIONAL INSTITUTION		1,00
rulane university 5823 st Charles ave New Orleans, La 70118		EDUCATIONAL INSTITUTION	SCHOLARSHIP	2,00
KIWANIS CLUB OF GERMANTOWN 7771 POPLAR PIKE GERMANTOWN, TN 38138		civic	GRANT	5(
KIWANIS CLUB OF AMORY PO BOX 439 AMORY, MS 38821		civic	GRANT	51
THE 1880 SOCIETY PO BOX 9562 BATON ROUGE, LA 70813		civic	GRANT	2
THE WILL B FOUNDATION 311 S COUNTY FARM RD WHEATON, IL 60187		civic	GRANT	2

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
CIWANIS CLUB OF KENNER NORTH		CIVIC	GRANT	
PO BOX 642033				
KENNER, LA 70065				967
KIWANIS CLUB OF BARTLETT		CIVIC	GRANT	
PO BOX 341426				
BARTLETT, TN 38184				1,000
			GRANT	
KIWANIS DISTRIC OFFICE		CIVIC	GRANT	
5319-B DIDESSE DR. BATON ROUGE 70808-6401				942
KIWANIS CLUB OF BIG EASY		CIVIC	GRANT	
4956 CHYSLER ST NEW ORLEANS, LA 70127				750
NEW ORDEANS, DA 70127				
				-
KIWANIS CLUB OF LAKE CHARLES NORTH		CIVIC	GRANT	
720 ENTERPRISE BLVD				0.3.0
LAKE CHARLES, LA 70601				938
KIWANIS CLUB OF SOUTHWEST LOUISIANA		CIVIC	GRANT	
1639 RYAN ST				
LAKE CHARLES, LA 70601				3,051
TX-OK KIWANIS FOUNDATION		civic	GRANT	
3010 W PARK ROW DR				
PANTEGO, TX 76013				500
TENIKA JAMES	NONE	INDIVIDUAL	GRANT	
				2,000
ROZELYN PARKER	NONE	INDIVIDUAL	GRANT	
				2,000
		-		
DANNY FIELDS	NONE	INDIVIDUAL	GRANT	
Total from continuation sheets				2,000

Grants and Contributions Paid During th		,		
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
ICHAEL GRACE	NONE	INDIVIDUAL	GRANT	2,00
ENNIS HARRIS	NONE	INDIVIDUAL	GRANT	2,00
ORDON SHELTON	none	INDIVIDUAL	GRANT	
				2,00
AFF CHAMBRE	NONE	INDIVIDUAL	GRANT	2,00
OSHUA ROY	NONE	INDIVIDUAL	GRANT	2,0
GAY LAZARE	NONE	INDIVIDUAL	GRANT	2,0
ACK SUMMERELL	none	INDIVIDUAL	GRANT	2,0
IARY MARTHA PIERRE	NONE	INDIVIDUAL	GRANT	2,0
CREATE FOUNDATION 213 MAIN ST CUPELO, MS 38804		civic	GRANT	14,4

FORM 990-PF INTERE	ST ON SAVIN	IGS AND TE	MPORARY	CASH ]	INVESTMENTS	STATEMENT
SOURCE		REV:	A) ENUE BOOKS		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
VARIOUS FINANCIAL I	NSTITUTIONS	5	3.		3.	
TOTAL TO PART I, LI	NE 3	Section of the sectio	3.		3.	
FORM 990-PF	DIVIDENDS	S AND INTE	REST FR	OM SECT	JRITIES	STATEMENT
SOURCE	GROSS AMOUNT	CAPITA GAINS DIVIDEN	R	(A) EVENUE R BOOKS	(B) NET INVES MENT INCO	
CREATE	12,390	•	0.	12,39	12,39	90.
TO PART I, LINE 4	12,390	•	0.	12,39	12,39	90.
FORM 990-PF		OTHER	INCOME			STATEMENT
DESCRIPTION			(A) REVEN PER BC	IUE	(B) NET INVEST- MENT INCOME	
GROSS INCOME FROM S FUNDRAISING EVENTS	PECIAL	•	1	.6,497.	(	).
TOTAL TO FORM 990-P	F, PART I,	LINE 11 =	1	6,497.	(	).
FORM 990-PF		ACCOUNT	ING FEE	ls		STATEMENT
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME		
ACCOUNTING		950	•	0	•	
TO FORM 990-PF, PG	 1, LN 16B	950	•	0	•	

FORM 990-PF	TAX	ES 		or and the second	STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOM		
PAXES -	146.		0.			0.
ro form 990-PF, PG 1, LN 18 =	146.		0.			0.
FORM 990-PF	OTHER E	XPENSES			STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE: MENT INC		(C) ADJUSTED NET INCOM		
AWARDS BANK FEES - CHARGES BOARD MEETING EXPENSE FRIENDS OF THE FOUNDATION	1,845. 802. 242.		0.			0.
EXPENSE FUNDRAISING EXPENSES POSTAGE	1,716. 2,475. 79.		0. 0.			0.
PRINTING AND SUPPLIES CREATE EXPENSE OTHER EXPENSES	557. 3,171. 3,869.		0. 0. 0.			0.
TO FORM 990-PF, PG 1, LN 23	14,756.		0.			0.
FORM 990-PF	OTHER INV	ESTMENTS	<del></del>		STATEMENT	7
DESCRIPTION		LUATION ETHOD	во	OK VALUE	FAIR MARKE VALUE	ET
MUTUAL FUND	·	FMV		707,374.	707,3	374.
TOTAL TO FORM 990-PF, PART I	I, LINE 13			707,374.	707,3	374

	LIST OF OFFICERS, D AND FOUNDATION MANA		STATI	EMENT 8
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
CHARLES H. FORD 5319-B DIDESSE DRIVE BATON ROUGE, LA 70808	EXECUTIVE DIRE 40.00	CTOR/TREASU	Q.	0.
BARBARA JOHNSON PO BOX 2026 LAUREL, MS 39442	PRESIDENT 1.00	0.	0.	0.
ROBERT BENOIT PO BOX 3711 LAFAYETTE, LA 70502	VICE PRESIDENT 1.00	0.	0.	0.
CATHERINE SIMMONS 3104 AUDUBON TRACE JEFFERSON, LA 70121	SECRETARY 1.00	0.	0.	0.
OTHA BRITTON 1928 MT PELIA RD MARTIN, TN 38237	IMM. PAST PRES	IDENT	0.	0.
DONNA CAFFERATA 5211 JACKSON ST ALEXANDRIA, LA 71303	DIRECTOR 1.00	0.	0.	0.
GLENN BORNE 20186 HARRIS ST COVINGTON, LA 70435	DIRECTOR 1.00	0.	0.	0.
DIANNE POLLY 6751 SUNBURST COVE MEMPHIS, TN 38119	DIRECTOR 1.00	0.	0.	0.
CLIFFORD GRIFFIN 196 ST CALAIS PLACE MADISONVILLE, LA 70447	DIRECTOR 1.00	0.	0.	0.
JEFF WITTENBRINK 524 BAIRD DR BATON ROUGE, LA 70808	DIRECTOR 1.00	0.	0.	0.
JOHN MCCAY, III 16 48TH STREET GULFPORT, MS 39507	IMM. PAST GOVE	ERNOR 0.	0.	0.

LOUISIANA-MISSISSIPPI-WEST TEN	NNESSEE KIW		72-09	05792
FRAVIS MOORE 173 MORRELL CIRCLE HATTISBURG, MS 39402	DIRECTOR 1.00	0.	0.	0.
BARBARA MCCAY 12419 CYPRESS DRIVE GULFPORT, MS 39503	LIEUTENANT GOVERNO 1.00	0.	0.	0.
PAUL RICHARD 16 48TH STREET NEW ORLEANS, LA 70131	LIEUTENANT GOVERNO 1.00	R 0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.

990-PF INVOLVEMENT WITH NONCHARITABLE ORGANIZATIONS PART XVII, LINE 1, COLUMN (D)

STATEMENT

9

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

LA, MISS, W. TENN, DISTRICT OF KIWANIS

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

FOUNDATION ASSISTANCE

990-PF

AFFILIATION WITH TAX-EXEMPT ORGANIZATIONS PART XVII, LINE 2, COLUMN (C)

STATEMENT 10

NAME OF AFFILIATED OR RELATED ORGANIZATION

LA, MISS, W. TENN, DISTRICT OF KIWANIS

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

AFFILIATE

### Form **8868**

(Rev. January 2017)

## Application for Automatic Extension of Time To File an **Exempt Organization Return**

OMB No. 1545-1709

Department of the Treasury Internal Revenue Service

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic

#### Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts

filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

				Enter file	r's identifyi	ng number
Type or	Name of exempt organization or other filer, see instru-	ctions.		Employer	identificatio	n number (EIN) or
print	LOUISIANA-MISSISSIPPI-WEST		ESSEE	, ,		
p	KIWANIS DISTRICT FOUNDATION		1		72-09	05792
File by the due date for	Number street and some exercite no. If a D.O. have a			Social se	curity number	
filing your	5253-B DIJON DRIVE				•	, ,
return. See instructions		reign add	ress, see instructions.			
	BATON ROUGE, LA 70808-9343					
Enter the	Return Code for the return that this application is for (file		te application for each return)			0 4
Applicat		Return	Application			Return
ls For	· <del>-</del> ··	Code	Is For			Code
	or Form 990-EZ	01	Form 990-T (corporation)			07
Form 99		02	Form 1041-A			08
Form 47	20 (individual)	03	Form 4720 (other than individual)			09
Form 99		04	Form 5227			10
Form 99	O-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	O-T (trust other than above)	06	Form 8870			12
	CHARLES FORD					
• The b	ooks are in the care of ▶ 5319-B DIDESSE	DRIV	<u>E - BATON ROUGE, L</u>	<u> 708</u>	21-016	9
Telep	hone No. ► <u>(225) 924-5509</u>		Fax No. >			
• If the	organization does not have an office or place of business	s in the Ur	nited States, check this box			▶ ∐
• II tile						
	is for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN) l	f this is fo	r the whole (	group, check this
		and atta	ich a list with the names and EINs o	f this is fo f all memb	r the whole of ers the exte	group, check this nsion is for.
<ul><li>If this box ►</li></ul>	is for a Group Return, enter the organization's four digit.  If it is for part of the group, check this box  equest an automatic 6-month extension of time until	and atta	ich a list with the names and EINs o	f all memb	r the whole of ers the extension organizat	nsion is for.
● If this box ▶ 1 I re	. If it is for part of the group, check this box 🕨	and atta	ch a list with the names and EINs o	f all memb	ers the exte	nsion is for.
● If this box ▶ 1 I re	. If it is for part of the group, check this box	and atta	ch a list with the names and EINs o	f all memb	ers the exte	nsion is for.
• If this box • I ref	. If it is for part of the group, check this box quest an automatic 6-month extension of time until the organization named above. The extension is for the calendar year	and atta AUGU organizati	ich a list with the names and EINs o ST 15, 2018 , to file on's return for:	f all memb the exem	ers the exte	nsion is for.
• If this box • I refer for	. If it is for part of the group, check this box equest an automatic 6-month extension of time until the organization named above. The extension is for the calendar year or xax year beginning OCT 1, 2016	and atta AUGU organizati , ar	ach a list with the names and EINs o ST 15, 2018 , to file on's return for:  ad ending SEP 30, 2017	f all memb the exem	ers the exte	nsion is for.
• If this box • I refer for	. If it is for part of the group, check this box quest an automatic 6-month extension of time until the organization named above. The extension is for the calendar year	and atta AUGU organizati , ar	ach a list with the names and EINs o ST 15, 2018 , to file on's return for:  ad ending SEP 30, 2017	f all memb the exem	ers the extent organizate organiz	nsion is for.
• If this box • for for 2	. If it is for part of the group, check this box paquest an automatic 6-month extension of time until the organization named above. The extension is for the calendar year or X tax year beginning OCT 1, 2016 he tax year entered in line 1 is for less than 12 months, of Change in accounting period	and atta AUGU organizati, ar	ach a list with the names and EINs on ST 15, 2018, to file on's return for:  ad ending SEP 30, 2017 on: Initial return	f all memb the exem	ers the extent organizate organiz	nsion is for.
• If this box • for for 2	. If it is for part of the group, check this box paquest an automatic 6-month extension of time until the organization named above. The extension is for the calendar year or X tax year beginning OCT 1, 2016 he tax year entered in line 1 is for less than 12 months, contact the calendar year entered in line 1 is for less than 12 months, contact the calendar year entered in line 1 is for less than 12 months, contact the calendar year entered in line 1 is for less than 12 months, contact the calendar year entered in line 1 is for less than 12 months, contact the calendar year entered in line 1 is for less than 12 months, contact the calendar year entered in line 1 is for less than 12 months, contact the calendar year entered in line 1 is for less than 12 months, contact the calendar year entered in line 1 is for less than 12 months, contact the calendar year entered in line 1 is for less than 12 months, contact the calendar year entered in line 1 is for less than 12 months, contact the calendar year entered in line 1 is for less than 12 months, contact the calendar year entered in line 1 is for less than 12 months, contact the calendar year entered in line 1 is for less than 12 months, contact the calendar year entered in line 1 is for less than 12 months, contact the calendar year entered in line 1 is for less than 12 months, contact the calendar year entered in line 1 is for less than 12 months year entered in line 1 is for less than 12 months year entered in line 1 is for less than 12 months year entered in line 1 is for less than 12 months year entered in line 1 is for less than 12 months year entered in line 1 is for less than 12 months year entered in line 1 is for less than 12 months year entered in line 1 is for less than 12 months year entered in line 1 is for less than 12 months year entered in line 1 is for less than 12 months year entered in line 1 is for less than 12 months year entered in line 1 is for less than 12 months year entered in line 1 is for less than 12 months year entered in line 1 is for	and atta AUGU organizati, ar	ach a list with the names and EINs on ST 15, 2018, to file on's return for:  ad ending SEP 30, 2017 on: Initial return	f all memb the exem	ers the extent organizate organiz	nsion is for. ion return
● If this box ▶ 1 I refer for for 2 If 1 3a If 1	. If it is for part of the group, check this box equest an automatic 6-month extension of time until the organization named above. The extension is for the calendar year or X tax year beginning OCT 1, 2016 he tax year entered in line 1 is for less than 12 months, of Change in accounting period his application is for Forms 990-BL, 990-PF, 990-T, 4720 nrefundable credits. See instructions.	and atta AUGU organizati , ar check reas , or 6069,	ach a list with the names and EINs on ST 15, 2018, to file on's return for:  ad ending SEP 30, 2017 on: Initial return enter the tentative tax, less any	f all memb the exem	ers the extent organizate organiz	nsion is for. ion return
If this box box for for for a lift for b lift for for b lift for	. If it is for part of the group, check this box equest an automatic 6-month extension of time until the organization named above. The extension is for the calendar year or a tax year beginning OCT 1, 2016 he tax year entered in line 1 is for less than 12 months, on Change in accounting period his application is for Forms 990-BL, 990-PF, 990-T, 4720 nrefundable credits. See instructions.	and atta AUGU organizati , ar check reas , or 6069,	ach a list with the names and EINs of ST 15, 2018, to file on's return for:  ad ending SEP 30, 2017 on: Initial return and enter the tentative tax, less any by refundable credits and	f all memb the exem	ers the extent organizate	nsion is for. ion return
If this box 1 I reference for for building build	. If it is for part of the group, check this box equest an automatic 6-month extension of time until the organization named above. The extension is for the calendar year or x tax year beginning OCT 1, 2016 he tax year entered in line 1 is for less than 12 months, on Change in accounting period his application is for Forms 990-BL, 990-PF, 990-T, 4720 nrefundable credits. See instructions. his application is for Forms 990-PF, 990-T, 4720, or 6069 timated tax payments made. Include any prior year overstime.	and atta AUGU organizati , ar check reas , or 6069, o, enter an payment a	ach a list with the names and EINs of ST 15, 2018, to file on's return for:  ad ending SEP 30, 2017 on: Initial return Initial	f all memb the exem	ers the extended and th	nsion is for. ion return
If this box box for for for for state of the box box box for	. If it is for part of the group, check this box equest an automatic 6-month extension of time until the organization named above. The extension is for the calendar year or a tax year beginning OCT 1, 2016 he tax year entered in line 1 is for less than 12 months, on Change in accounting period his application is for Forms 990-BL, 990-PF, 990-T, 4720 nrefundable credits. See instructions.	and atta AUGU organizati , ar sheck reas , or 6069, or enter an oayment a	ach a list with the names and EINs of ST 15, 2018, to file on's return for:  ad ending SEP 30, 2017 on: Initial return enter the tentative tax, less any yrefundable credits and llowed as a credit. th this form, if required,	f all members the exem	ers the extent organizate	nsion is for.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions. Form 8868 (Rev. 1-2017)

MAIL TO: DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE CENTER OGDEN, UT 84201-0045