

DIAGNOSTIC REPORT

TRUST NAME: MASON AND LULA COLE CHARITABLE TUA
FEDERAL EIN: 26-6779458
TRUST NUMBER: 600008015

** No Severe Diagnostics Detected **

Informational Diagnostics: Total 2

Federal (2)

1. Form 2220

The Form 2220 will not print per your underpayment penalty compute option

2. Form 990-PF - Part II, Balance Sheet

In order to generate supporting detail schedules for lines 11 and/or 14, you must indicate if the depreciable asset was held for investment or not held for investment.

Activity: RESIDENCE- BAY WALK .095 A/C LOT 3

Description: BAY WALK .095 AC L Date Acquired: 01/01/2012 Cost: 157,850.

** No Electronic Filing Alerts Detected **

** No Electronic Filing Rejects Detected **

** No Electronic Filing XML Validation Errors Detected **

Form **8879-EO**

**IRS e-file Signature Authorization
for an Exempt Organization**

OMB No. 1545-1878

For calendar year 2017, or fiscal year beginning _____, 2017, and ending _____, 20_____

▶ **Do not send to the IRS. Keep for your records.**

▶ **Go to www.irs.gov/Form8879EO for the latest information.**

2017

Department of the Treasury
Internal Revenue Service

Name of exempt organization

MASON AND LULA COLE CHARITABLE TUA

Employer identification number

26-6779458

Name and title of officer

SHERRI CLOUSER, TRUST OFFICER

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a	Form 990 check here ▶	<input type="checkbox"/>	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12) . . .	1b	_____
2a	Form 990-EZ check here ▶	<input type="checkbox"/>	b	Total revenue, if any (Form 990-EZ, line 9)	2b	_____
3a	Form 1120-POL check here ▶	<input type="checkbox"/>	b	Total tax (Form 1120-POL, line 22)	3b	_____
4a	Form 990-PF check here ▶	<input checked="" type="checkbox"/>	b	Tax based on investment income (Form 990-PF, Part VI, line 5).	4b	<u>4,989.</u>
5a	Form 8868 check here ▶	<input type="checkbox"/>	b	Balance Due (Form 8868, line 3c)	5b	_____

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2017 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize ERNST & YOUNG U.S. LLP to enter my PIN 2 0 0 5 1 as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶

Sherrin Clouser

Date ▶

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

5 4 6 1 8 5 2 0 0 5 1

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2017 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163, Modernized e-File (MeF)** Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶

Doak A. Pelt

Date ▶

**ERO Must Retain This Form - See Instructions
Do Not Submit This Form To the IRS Unless Requested To Do So**

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2017)

ESTIMATED TAX WORKSHEET FOR FORM 990-W

A. 2018 Estimated Tax		A	
B. Enter 100 % of Line A	B		
C. Enter 100 % of tax on 2017 FORM 990-PF	C	4,989.	
D. Required Annual Payment (Smaller of lines B or C)			D 4,989.
E. Income tax withheld (if applicable)			E NONE
F. Balance (As rounded to the nearest multiple of 4)			F 4,992.

Record of Estimated Tax Payments

Payment number	(a) Date	(b) Amount	(c) 2017 overpayment credit applied	(d) Total amount paid and credited (add (b) and (c))
1	05/15/2018	1,248.		1,248.
2	06/15/2018	1,248.		1,248.
3	09/17/2018	1,248.		1,248.
4	12/17/2018	1,248.		1,248.
Total		4,992.		4,992.

ESTIMATED PAYMENTS MUST BE MADE USING THE ELECTRONIC FEDERAL TAX PAYMENTS SYSTEM (EFTPS). THIS WORKSHEET MERELY PROVIDES THE AMOUNTS WHICH NEED TO BE PAID VIA THE ABOVE METHOD.

Department of the Treasury
Internal Revenue Service

or Section 4947(a)(1) Trust Treated as Private Foundation
 ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

2017

Open to Public Inspection

For calendar year 2017 or tax year beginning , 2017, and ending , 20

Name of foundation
MASON AND LULA COLE CHARITABLE TUA

Number and street (or P.O. box number if mail is not delivered to street address) Room/suite
P.O. BOX 1419

City or town, state or province, country, and ZIP or foreign postal code
KILMARNOCK, VA 22482

A Employer identification number
26-6779458

B Telephone number (see instructions)
804-435-4246

C If exemption application is pending, check here

D 1. Foreign organizations, check here
2. Foreign organizations meeting the 85% test, check here and attach computation

E If private foundation status was terminated under section 507(b)(1)(A), check here

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

G Check all that apply: Initial return Initial return of a former public charity
 Final return Amended return
 Address change Name change

H Check type of organization: Section 501(c)(3) exempt private foundation
 Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 4,255,695.

J Accounting method: Cash Accrual
 Other (specify) _____
(Part I, column (d) must be on cash basis.)

Part 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) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B.				
	3 Interest on savings and temporary cash investments	811.	811.		STMT 1
	4 Dividends and interest from securities	100,361.	102,901.		STMT 2
	5a Gross rents	9,000.	9,000.		
	b Net rental income or (loss) <u>19.</u>				
	6a Net gain or (loss) from sale of assets not on line 10	439,854.			
	b Gross sales price for all assets on line 6a <u>1,494,982.</u>				
	7 Capital gain net income (from Part IV, line 2)		439,854.		
	8 Net short-term capital gain.				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	550,026.	552,566.			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	49,006.	49,006.		
	14 Other employee salaries and wages		NONE	NONE	
	15 Pension plans, employee benefits		NONE	NONE	
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule) STMT 3	600.	600.	NONE	NONE
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions) STMT 4	2,061.	838.		
	19 Depreciation (attach schedule) and depletion	5,739.			
	20 Occupancy				
	21 Travel, conferences, and meetings		NONE	NONE	
	22 Printing and publications		NONE	NONE	
	23 Other expenses (attach schedule) STMT 5	3,242.	3,242.		
	24 Total operating and administrative expenses. Add lines 13 through 23.	60,648.	53,686.	NONE	NONE
	25 Contributions, gifts, grants paid	246,500.			246,500.
26 Total expenses and disbursements. Add lines 24 and 25	307,148.	53,686.	NONE	246,500.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	242,878.				
b Net investment income (if negative, enter -0-)		498,880.			
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash - non-interest-bearing				
	2	Savings and temporary cash investments		39,074.	69,913.	69,913.
	3	Accounts receivable ▶ Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ▶ Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶ Less: allowance for doubtful accounts ▶				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10a	Investments - U.S. and state government obligations (attach schedule)	STMT 6	35,147.	10,142.	10,360.
	b	Investments - corporate stock (attach schedule)	STMT 7	1,653,665.	1,910,065.	3,145,213.
	c	Investments - corporate bonds (attach schedule)	STMT 12	882,514.	869,737.	883,209.
	11	Investments - land, buildings, and equipment: basis Less: accumulated depreciation (attach schedule) ▶				
	12	Investments - mortgage loans				
	13	Investments - other (attach schedule)	STMT 14	210,000.	210,000.	147,000.
	14	Land, buildings, and equipment: basis Less: accumulated depreciation (attach schedule) ▶				
15	Other assets (describe ▶)					
16	Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		2,820,400.	3,069,857.	4,255,695.	
Liabilities	17	Accounts payable and accrued expenses				
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons.				
	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe ▶)				
23	Total liabilities (add lines 17 through 22)				NONE	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input type="checkbox"/>					
	and complete lines 24 through 26, and lines 30 and 31.					
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/>					
	and complete lines 27 through 31.					
27	Capital stock, trust principal, or current funds		2,820,400.	3,069,857.		
28	Paid-in or capital surplus, or land, bldg., and equipment fund					
29	Retained earnings, accumulated income, endowment, or other funds					
30	Total net assets or fund balances (see instructions)		2,820,400.	3,069,857.		
31	Total liabilities and net assets/fund balances (see instructions)		2,820,400.	3,069,857.		

Part III Analysis of Changes in Net Assets or Fund Balances		
1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1 2,820,400.
2	Enter amount from Part I, line 27a	2 242,878.
3	Other increases not included in line 2 (itemize) ▶ SEE STATEMENT 15	3 6,919.
4	Add lines 1, 2, and 3	4 3,070,197.
5	Decreases not included in line 2 (itemize) ▶ SEE STATEMENT 16	5 340.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6 3,069,857.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)				(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a PUBLICLY TRADED SECURITIES						
b						
c						
d						
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)			
a 1,494,982.		1,055,128.	439,854.			
b						
c						
d						
e						
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.						
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0- or Losses (from col. (h))			
a			439,854.			
b						
c						
d						
e						
2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		2	439,854.		
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8			3			

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2016	241,194.	3,940,959.	0.061202
2015	224,542.	4,100,014.	0.054766
2014	215,444.	4,244,843.	0.050754
2013	192,000.	4,067,488.	0.047204
2012	180,000.	3,745,958.	0.048052
2 Total of line 1, column (d)			2 0.261978
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years			3 0.052396
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5			4 4,172,481.
5 Multiply line 4 by line 3.			5 218,621.
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 4,989.
7 Add lines 5 and 6.			7 223,610.
8 Enter qualifying distributions from Part XII, line 4 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.			8 246,500.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

Table with 11 rows for excise tax calculations. Includes fields for exempt foundations, tax under section 511, add lines 1 and 2, subtitle A tax, tax based on investment income, credits/payments (6a-6d), total credits, penalty, tax due, overpayment, and amount credited to 2018 estimated tax.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Columns include question number, 'Yes', and 'No'. Questions cover political influence, expenditures, Form 1120-POL filing, political tax expenditures, reimbursement, IRS reporting, changes in governing instruments, unrelated business income, liquidation, section 508(e) requirements, assets, states reported to, Form 990-PF distribution, private operating foundation status, and substantial contributors.

Part VII-A Statements Regarding Activities (continued)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions 11 X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions 12 X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A 13 X
14 The books are in care of SEE STATEMENT 17 Telephone no. Located at ZIP+4
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. 15
16 At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country 16 X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a During the year, did the foundation (either directly or indirectly):
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes No X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes 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 No X
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) Yes No X
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017? 1b X 1c X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):
a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? Yes No X
If "Yes," list the years
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) 2b X
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes No X
b If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or 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.) 3b
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017? 4b X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year, did the foundation pay or incur any amount to:		Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions		5b	
Organizations relying on a current notice regarding disaster assistance, check here	<input type="checkbox"/>		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b	<input checked="" type="checkbox"/>
If "Yes" to 6b, file Form 8870.			
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?		7b	

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions.

(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) Expense account, other allowances
CHESAPEAKE TRUST COMPANY P. O. BOX 1419, KILMARNOCK, VA 22482	TRUSTEE 2	49,006.	-0-	-0-

2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE		NONE	NONE	NONE

Total number of other employees paid over \$50,000 **NONE**

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		NONE
Total number of others receiving over \$50,000 for professional services ▶		NONE

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NONE	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount	
1 NONE		
2		
All other program-related investments. See instructions. 3 NONE		
Total. Add lines 1 through 3 ▶		

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, 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	3,943,950.
b	Average of monthly cash balances	1b	145,071.
c	Fair market value of all other assets (see instructions).	1c	147,000.
d	Total (add lines 1a, b, and c)	1d	4,236,021.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	NONE
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	4,236,021.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	63,540.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,172,481.
6	Minimum investment return. Enter 5% of line 5	6	208,624.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	208,624.
2a	Tax on investment income for 2017 from Part VI, line 5	2a	4,989.
b	Income tax for 2017. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	4,989.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	203,635.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	203,635.
6	Deduction from distributable amount (see instructions).	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	203,635.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	246,500.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	246,500.
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. See instructions	5	4,989.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	241,511.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				203,635.
2 Undistributed income, if any, as of the end of 2017:				
a Enter amount for 2016 only.			NONE	
b Total for prior years: 20____,20____,20____		NONE		
3 Excess distributions carryover, if any, to 2017:				
a From 2012				NONE
b From 2013				NONE
c From 2014				4,314.
d From 2015				24,457.
e From 2016				45,978.
f Total of lines 3a through e	74,749.			
4 Qualifying distributions for 2017 from Part XII, line 4: ▶ \$ <u>246,500.</u>				
a Applied to 2016, but not more than line 2a			NONE	
b Applied to undistributed income of prior years (Election required - see instructions)		NONE		
c Treated as distributions out of corpus (Election required - see instructions)	NONE			
d Applied to 2017 distributable amount				203,635.
e Remaining amount distributed out of corpus.	42,865.			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a).)	NONE			NONE
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	117,614.			
b Prior years' undistributed income. Subtract line 4b from line 2b.		NONE		
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		NONE		
d Subtract line 6c from line 6b. Taxable amount - see instructions		NONE		
e Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount - see instructions			NONE	
f Undistributed income for 2017. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018.				NONE
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)	NONE			
8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions)	NONE			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	117,614.			
10 Analysis of line 9:				
a Excess from 2013				NONE
b Excess from 2014				4,314.
c Excess from 2015				24,457.
d Excess from 2016				45,978.
e Excess from 2017				42,865.

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) NOT APPLICABLE

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

Table with 5 columns: (a) 2017, (b) 2016, (c) 2015, (d) 2014, (e) Total. Rows include 2a (Adjusted net income), 2b (85% of line 2a), 2c (Qualifying distributions from Part XII), 2d (Amounts included in line 2c not used directly for active conduct of exempt activities), 2e (Qualifying distributions made directly for active conduct of exempt activities), 3 (Alternative tests: Assets, Endowment, Support), and 4 (Gross investment income).

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)

1 Information Regarding Foundation Managers:
a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

N/A

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

N/A

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here [X] if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

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

Part XV **Supplementary Information** *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SEE STATEMENT 28				246,500.
Total			▶ 3a	246,500.
b <i>Approved for future payment</i>				
Total			▶ 3b	

RENT AND ROYALTY INCOME

Taxpayer's Name MASON AND LULA COLE CHARITABLE TUA	Identifying Number 26-6779458
--	---

DESCRIPTION OF PROPERTY
RESIDENCE- BAY WALK .095 A/C LOT 3 TOWN

Yes No Did you actively participate in the operation of the activity during the tax year?

TYPE OF PROPERTY: 1 - SINGLE FAMILY RESIDENCE

RENTAL INCOME	9,000.	
OTHER INCOME:		
TOTAL GROSS INCOME		9,000.

OTHER EXPENSES:		
INSURANCE	642.	
TAXES	1,014.	
UTILITIES	363.	
OTHER EXPENSES	1,223.	

DEPRECIATION (SHOWN BELOW)	5,739.	
LESS: Beneficiary's Portion		
AMORTIZATION		
LESS: Beneficiary's Portion		
DEPLETION		
LESS: Beneficiary's Portion		
TOTAL EXPENSES		8,981.
TOTAL RENT OR ROYALTY INCOME (LOSS)		19.

Less Amount to

Rent or Royalty	_____
Depreciation	_____
Depletion	_____
Investment Interest Expense	_____
Other Expenses	_____
Net Income (Loss) to Others	_____

Net Rent or Royalty Income (Loss) 19.

Deductible Rental Loss (if Applicable) _____

SCHEDULE FOR DEPRECIATION CLAIMED

(a) Description of property	(b) Cost or unadjusted basis	(c) Date acquired	(d) ACRS des.	(e) Bus. %	(f) Basis for depreciation	(g) Depreciation in prior years	(h) Method	(i) Life or rate	(j) Depreciation for this year
SEE STATEMENT									
Totals									5,739.

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE

=====

OTHER DEDUCTIONS

OTHER RENTAL EXPENSES

1,223.

1,223.

=====

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

=====

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
-----	-----	-----
SYNCHRONY BANK 2.65% CD FDIC INS DUE 07/	265.	265.
SYNCHRONY BANK 2.65% CD FDIC INS DUE 07/	133.	133.
GOLDMAN SACHS BK 2.05% CD FDIC INS DUE 0	413.	413.
TOTAL	811.	811.
	=====	=====

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----
DIVIDENDS AND INTEREST	100,361.	102,901.
	-----	-----
TOTAL	100,361.	102,901.
	=====	=====

FORM 990PF, PART I - ACCOUNTING FEES
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----	ADJUSTED NET INCOME -----	CHARITABLE PURPOSES -----
TAX PREPARATION FEE (NON-ALLOC	600.	600.		
TOTALS	600.	600.	NONE	NONE

FORM 990PF, PART I - TAXES
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----
FOREIGN TAXES	91.	91.
FEDERAL TAX PAYMENT - PRIOR YE	307.	
FEDERAL ESTIMATES - PRINCIPAL	916.	
FOREIGN TAXES ON QUALIFIED FOR	667.	667.
FOREIGN TAXES ON NONQUALIFIED	80.	80.
	-----	-----
TOTALS	2,061.	838.
	=====	=====

FORM 990PF, PART I - OTHER EXPENSES
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----
RENT AND ROYALTY EXPENSES	3,242.	3,242.
TOTALS	----- 3,242. =====	----- 3,242. =====

FORM 990PF, PART II - U.S. AND STATE OBLIGATIONS

=====

DESCRIPTION	ENDING BOOK VALUE	ENDING FMV
-----	-----	---
FFCB 3.75% 1/29/16		
FHLB 4.375% 06/14/19	10,142.	10,360.
AR ST DEV FA E 1.606% EDR POOL		
TOTALS	----- 10,142. =====	----- 10,360. =====

FORM 990PF, PART II - CORPORATE STOCK

=====

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ---
AFLAC INC	35,781.	70,224.
ABBOTT LABS	9,380.	25,682.
ALLSTATE CORP	15,323.	52,355.
AMGEN INC	5,954.	21,738.
BOEING CO	24,795.	44,237.
AUTOZONE INC		
CVS HEALTH CORP		
CERNER CORP	3,657.	13,478.
CHUBB CORP		
CISCO SYSTEMS INC		
CLOROX CO DEL	5,059.	14,874.
COLGATE PALMOLIVE CO	7,620.	15,090.
CONOCOPHILLIPS		
GENERAL DYNAMICS CORP	8,932.	40,690.
GENERAL ELECTRIC CO		
HARRIS CORP DEL	17,749.	84,990.
HOME DEPOT INC		
IBM CORP		
ILLINOIS TOOL WORKS INC	10,484.	33,370.
ISHARES TR US FINL ETF	38,211.	119,430.
ISHARES TR US BASIC MATERIALS	4,319.	10,220.
ISHARES MSCI EAFE	72,945.	126,558.
JOHNSON & JOHNSON	32,565.	69,860.
LILLY, ELI & CO W/RIGHTS		
MCDONALDS CORP	16,889.	51,636.
MICROSOFT CORP	29,488.	85,540.
PHILIP MORRIS INTL INC	15,844.	42,260.
PROCTER & GAMBLE CO	14,480.	22,970.
PHILLIPS 66 COM		

FORM 990PF, PART II - CORPORATE STOCK

=====

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ---
STERICYCLE INC		
TARGET CORP		
VALERO ENERGY CORP NEW	2,952.	18,382.
VERIZON COMMUNICATIONS	8,380.	15,879.
CME GROUP INC		
CAPITAL ONE FINL CORP		
DISH NETWORK CORP		
FISERV INC	17,871.	91,791.
NEXTERA ENERGY INC COMMON	7,989.	23,429.
PPL CORP		
TEXAS INSTRUMENTS INC	19,687.	83,552.
UNION PACIFIC CORP	8,405.	26,820.
BRISTOL MYERS SQUIBB		
METLIFE INC		
ORACLE CORP	20,096.	33,096.
PUBLIC SERVICE ENTERPRISE		
SPDR FUND MATERIALS SELECT SEC	19,608.	24,212.
WESTERN UNION CO		
VIACOM CL B		
UNITEDHEALTH GRP INC	42,164.	55,115.
L-3 COMMUNICATIONS HLDGS		
BLACKROCK INC		
UGI CORP	5,856.	14,085.
JPMORGAN CHASE & CO	14,419.	42,776.
APPLE INC	24,959.	50,769.
ABBVIE INC	6,781.	29,013.
CF INDUSTRIES HOLDING		
GILEAD SCIENCES	22,733.	25,074.
ISHARES TR US INDL ETF	2,929.	7,369.

FORM 990PF, PART II - CORPORATE STOCK

=====

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ---
MURPHY USA INC		
SCWAB US AGGREGATE BOND ETF		
VANGUARD TOTAL INTERNATIONAL B	70,668.	72,040.
ISHARES IBOXX HIGH YIELD BOND		
OPPENHEIMER SENIOR FLOATING RA		
FOOT LOCKER INC		
FORD MOTOR COMPANY		
LAS VEGAS SANDS CORP		
LOWES COMPANIES INC		
MACYS INC		
TJX COMPANIES INC		
WAL-MART STORES INC	12,161.	19,750.
CHEVRON CORP	23,858.	31,298.
SCHLUMBERGER LTD	22,907.	23,587.
AMERIPRISE FINANCIAL	32,926.	50,841.
WELLS FARGO &CO		
DOW CHEMICAL COMPANY		
ISHARES RUSSELL 2000 ETF	32,905.	104,435.
ISHARES RUSSELL MID CAP ETF	30,897.	103,024.
SCHWAB EMERGING MARKETS EQUITY		
SCHWAB INTERNATIONAL EQUITY ET	76,576.	90,490.
VANGUARD REIT ETF	24,409.	26,388.
GLOBAL COMMODITY EQUITY ETF		
CHUBB LTD		
WALT DISNEY CO		
VF CORPORATION		
ISHARES IBOXX HIGH YIELD BOND	69,329.	71,990.
VANGUARD TOTAL INTL BD ETF		
INGERSOLL-RAND PLC SHS	14,940.	15,608.

FORM 990PF, PART II - CORPORATE STOCK

=====

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ---
BROADCOM LIMITED COM NPV	24,320.	25,690.
AT&T INC	22,020.	23,328.
AGILENT TECH INC COM	16,098.	18,417.
ALIGN TECH I COM	17,379.	22,219.
ANADARKO PETROLEUM	4,709.	5,364.
BECTON DICKINSON & CO	9,928.	10,703.
BURLINGTON STORES INC COM	16,037.	22,145.
CANADIAN NATIRAL RESOURCES LTD	23,443.	26,433.
CHARLES RIVER LAB INTERNATI	10,136.	10,945.
CHARTER COMMUNICATIONS INC	40,598.	36,956.
CHILDRENS PLACE INC COM	40,894.	58,140.
COHERENT INC COM	21,538.	28,222.
THE COOPER COMPANIES INC	12,018.	10,894.
DOLLAR TREE INC COM	16,030.	18,779.
DOWDUPONT INC COM	26,400.	35,610.
EOG RESOURCES INC COM	23,426.	28,057.
ELECTRONIC ARTS INC COM	22,862.	21,012.
EQUINIX INC COM	26,650.	27,193.
GRUBHUB INC COM	20,335.	28,720.
HONEYWELL INTL INC	13,768.	15,336.
ISHARES EMERGING MARKETS ETF	58,360.	63,612.
L3 TECHNOLOGIES INC COM	12,701.	39,570.
THE ESTEE LAUDER CO INC CL A	10,994.	12,724.
LAZARD INTL STRATEGIC EQUITY O	100,000.	107,834.
ELI LILLY & CO	5,708.	12,669.
LUMENTUM HLDGS INC	10,786.	9,780.
MAGNA INTL INC	15,098.	17,851.
MARSH MCLENNAN CO INC	13,798.	14,243.
MARRIOT INTL INC CL A	44,955.	61,079.

FORM 990PF, PART II - CORPORATE STOCK

=====

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ---
MCCORMICK & CO INC	29,046.	30,573.
MORGAN STANLEY COM NEW	11,725.	13,118.
NCR CORP COM	6,170.	5,099.
PVH CORP COM	21,325.	23,326.
PARKER-HANNIFIN CORP COM	11,788.	14,969.
PEPSICO INC	23,324.	23,984.
THE PRICELINE GROUP INC COM NE	18,319.	17,377.
SANOFI	31,066.	27,950.
SELECT SECTOR UTI SELECT SPDR	24,340.	23,706.
TANGER FACTORY OUTLETS CTRS	12,215.	13,255.
TYSON FOOD INC CL A	11,035.	12,566.
UNITED RENTALS INC COM	13,539.	20,629.
VEEVA SYSTEMS INC COM	9,304.	9,121.
	-----	-----
TOTALS	1,910,065.	3,145,213.
	=====	=====

FORM 990PF, PART II - CORPORATE BONDS

=====

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ---
AT&T COM GLOBAL 5.5% 2/1/18	24,937.	25,072.
AT&T INC 3.875% 8/15/21	5,087.	5,180.
DUKE ENGY CORP 3.05% 8/15/22	15,260.	15,165.
TOYOTA MOTOR CREDIT CORP 1.288	14,970.	15,016.
SHELL INT 4.3% 9/22/19	25,000.	25,898.
TARGET CORP 6% 1/15/18	15,010.	15,019.
VERIZON 5.5% 2/15/18		
PITNEY BOWES INC 4.75% 5/15/18		
WAL MART STORES 3.25%10/25/20	50,069.	51,513.
NUCOR 4.125% 9/15/22	24,884.	26,528.
HUMANNA INC 3.15% 12/1/22	15,039.	15,100.
LOWES CO 3.12% 4/15/22	5,024.	5,101.
NIKE INC 2.25% 5/01/23	10,039.	9,945.
FORD MOTOR CREDIT VAR 11/20/18	24,951.	24,987.
GENERAL ELECTRIC VAR 20 4/15/2	19,974.	20,174.
GOLDMAN SACHS GRP INC 2.250% 3		
GOLDMAN SACHS BK 2.05% CD 1/1		
MORGAN STANLEY VAR I8 11/9/18	20,150.	20,048.
NORFOLK SOUTHERN 3.25% 12/01/2	51,661.	53,283.
OLD REPUBLIC INTL CORP 4.875%	5,191.	5,356.
BARCLAYS BANK PLC 4% 9/30/25	20,159.	20,645.
BNSF RAILWAY CO 5.629% REMIC 4	6,102.	6,009.
GOLDMAN SACHS GROUP 4% 8/15/21	20,139.	20,798.
SCANA CORP 4.75% 5/15/21		
SYNCHRONY BANK CD 2.65% 7/27/2	9,821.	10,043.
SYNCHRONY BANK CD 2.65% 7/27/2	5,018.	5,021.
WELLS FARGO & CO NEW SR GLBL N	14,968.	14,717.
CAMPBELL SOUP CO 3.3% 3/19/25	24,824.	25,106.
COCA COLA ENT 7% 10/01/26	49,204.	50,874.

FORM 990PF, PART II - CORPORATE BONDS

=====

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ---
CONAGRA FOODS IN 3.25% 9/15/22	24,142.	25,322.
DUKE ENGY CORP 2.6% 12/15/22	24,517.	24,250.
GOLDMAN SACHS GR STEP 30 DUE 1	49,810.	49,302.
JPMORGAN CHASE & STEP DUE 3/29	106,498.	105,363.
MEDTRONIC INC 3.625% DUE 3/15/	13,323.	13,614.
ROYAL BANK OF C 2.25% 11/19/24	29,000.	29,591.
WEYERHAEUSER CO 6.875% 12/15/3	28,670.	32,876.
CABOT CORP 7.280% 10/21/2027	16,983.	17,101.
EATON VANCE CORP	25,118.	25,586.
JPMORGAN CHASE CO 3.200% 6/15/	24,817.	24,987.
JPMORGAN CHASE CO 3.000% 8/30/	24,765.	24,350.
SOUTHWEST AIRLINES CO 3.000% 1	24,613.	24,269.
HSBC 5.75% 11/15/17		
TOTALS	----- 869,737. =====	----- 883,209. =====

FORM 990PF, PART II - OTHER INVESTMENTS

=====

DESCRIPTION -----	COST/ FMV C OR F -----	ENDING BOOK VALUE -----	ENDING FMV ---
BAY WALK .095 A/C LOT 3 TOWN O	C	210,000.	147,000.
TOTALS		----- 210,000.	----- 147,000.
		=====	=====

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

=====

DESCRIPTION -----	AMOUNT -----
COST BASIS ADJUSTMENT	1,123.
DEPRECIATION ADJUSTMENT	5,739.
REIMBURSEMENT FOR PY EXPENSE	57.

TOTAL	6,919.
	=====

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

=====

DESCRIPTION -----	AMOUNT -----
2016 ROC	337.
ROUNDING	3.

TOTAL	340.
	=====

FORM 990PF, PART VII-A, LINE 14 - BOOKS ARE IN THE CARE OF
=====

NAME: CHESAPEAKE TRUST COMPANY
SHERRI L. CLOUSER,

ADDRESS: P. O. BOX 1419
KILMARNOCK, VA 22482

TELEPHONE NUMBER: (804)435-4246

RECIPIENT NAME:
RAPPAHANNOCK GENERAL HOSPITAL
FOUNDATION
ADDRESS:
101 HARRIS ROAD
KILMARNOCK, VA 22482
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
MEDICAL
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 10,000.

RECIPIENT NAME:
LANCASTER COMMUNITY LIBRARY
ADDRESS:
235 SCHOOL STREET
KILMARNOCK, VA 22482
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME:
NORTHERN NECK ORCHESTRA
ADDRESS:
P O BOX 263
KILMARNOCK, VA 22482
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 6,000.

=====

RECIPIENT NAME:
NORTHERN NECK FOOD BANK
ADDRESS:
P. O. BOX 93
WHITE STONE, VA 22578
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 15,000.

RECIPIENT NAME:
RAPPAHANNOCK COMM COLLEGE EDUCATIONAL FN
ADDRESS:
P.O. BOX 923
WARSAW, VA 22572
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
EDUCATIONAL
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME:
SHIRLEY PERKINS MEMORIAL FUND
FOR ANIMALS
ADDRESS:
810 GRIFFINS LANDING RD
LANCASTER, VA 22503
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
N/A
AMOUNT OF GRANT PAID 2,500.

=====

RECIPIENT NAME:

WESTMORELAND PLAYERS

ADDRESS:

PO BOX 253
CALLAO, VA 22435

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 15,000.

RECIPIENT NAME:

CHESAPEAKE ACADEMY

ADDRESS:

107 STEAMBOAT ROAD
IRVINGTON, VA 22480

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATIONAL

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 6,700.

RECIPIENT NAME:

LANCASTER/NORTHUMBERLAND
INTERFAITH COUNCIL

ADDRESS:

P. O. BOX 368
KILMARNOCK, VA 22482

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 6,000.

=====

RECIPIENT NAME:

SMITH POINT SEA RESCUE

ADDRESS:

P O BOX 662
BURGESS, VA 22432

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 12,000.

RECIPIENT NAME:

HABITAT FOR HUMANITY
LANCASTER/NORTHUMBERLAND

ADDRESS:

PO BOX 908
KILMARNOCK, VA 22482

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 10,000.

RECIPIENT NAME:

RAPPAHANNOCK FOUNDATION FOR THE ARTS

ADDRESS:

708 RAPPAHANNOCK DRIVE
White Stone, VA 22578

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 20,000.

=====

RECIPIENT NAME:

PRESERVATION NORTHERN NECK
ATTN: EDWARD WHITE

ADDRESS:

P O BOX 691
WARSAW, VA 22572

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 2,000.

RECIPIENT NAME:

NORTHERN NECK LAND CONSERVANCY

ADDRESS:

PO BOX 125
LANCASTER, VA 22503

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE PURPOSES

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 4,000.

RECIPIENT NAME:

LANCASTER COUNTY VA EDUCATION FOUNDATION

ADDRESS:

PO BOX 928
KILMARNOCK, VA 22482

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 12,000.

RECIPIENT NAME:
KILMARNOCK MUSEUM, INC.
ADDRESS:
PO BOX 2276
KILMARNOCK, VA 22482
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 3,000.

RECIPIENT NAME:
VISIONS LEAD NORTHERN NECK
ADDRESS:
P.O. BOX 78
KILMARNOCK, VA 22482
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME:
THE HAVEN SHELTER
ADDRESS:
PO BOX 1267, 5726 RICHMOND ROAD
WARSAW, VA 22572
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 10,000.

=====

RECIPIENT NAME:
CAMP KEKOKA
ADDRESS:
1083 BOYS CAMP RD
Kilmarnock, VA 22482
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:
Northern Neck Family YMCA
ADDRESS:
39 WILLIAM B GRAHAM CT
Kilmarnock, VA 22482
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 3,800.

RECIPIENT NAME:
PARTNERS FOR LANCASTER COUNTY
SCHOOLS FDN
ADDRESS:
P. O. BOX 144
IRVINGTON, VA 22480
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
EDUCATIONAL
FOUNDATION STATUS OF RECIPIENT:
N/A
AMOUNT OF GRANT PAID 5,000.

=====

RECIPIENT NAME:

BOYS AND GIRLS CLUB OF THE
NORTHERN NECK

ADDRESS:

P O BOX 564
KILMARNOCK, VA 22482

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 25,000.

RECIPIENT NAME:

ANIMAL WELFARE LEAGUE
C/O JUDY HARVELL

ADDRESS:

P O BOX 975
WHITE STONE, VA 22578

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 4,000.

RECIPIENT NAME:

THE RWC FOUNDATION

ADDRESS:

132 LANCASTER DRIVE
IRVINGTON, VA 22480

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 10,000.

RECIPIENT NAME:
LEGAL AID WORKS
ADDRESS:
500 LAFAYETTE BOULEVARD
FREDERICKSBURG, VA 22401
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME:
THE LINK
ADDRESS:
P.O. BOX 443
Sterling, VA 20167-0443
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 4,000.

RECIPIENT NAME:
HAMPDEN SYDNEY COLLEGE
ADDRESS:
BOX 637
HAMPDEN SYDNEY, VA 23943
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 10,000.

=====

RECIPIENT NAME:

HOSPICE OF THE NORTHERN NECK

ADDRESS:

PO BOX 262
WARSAW, VA 22572

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 6,000.

RECIPIENT NAME:

Northern Neck - Middlesex Free Health
Clinic

ADDRESS:

P.O. BOX 1694
Kilmarnock, VA 22482

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 13,000.

RECIPIENT NAME:

NORTHERN NECK ARTISAN TRAIL

ADDRESS:

PO BOX 166
GREENVILLE, VA 24401

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 5,000.

=====

RECIPIENT NAME:

NORTHERN NECK CASA

ADDRESS:

PO BOX 695
LANCASTER, VA 22503

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 3,000.

RECIPIENT NAME:

NORTHERN NECK SAIL AND POWER SQUADRON

ADDRESS:

2949 HARRY HOGAN ROAD
CALLAO, VA 22435

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 3,000.

TOTAL GRANTS PAID:

246,500.

=====

RENT AND ROYALTY SUMMARY

=====

PROPERTY -----	TOTAL INCOME -----	DEPLETION/ DEPRECIATION -----	OTHER EXPENSES -----	ALLOWABLE NET INCOME -----
RESIDENCE- BAY WALK	9,000.	5,739.	3,242.	19.
	-----	-----	-----	-----
TOTALS	9,000.	5,739.	3,242.	19.
	=====	=====	=====	=====

**SCHEDULE D
(Form 1041)**

Department of the Treasury
Internal Revenue Service

Capital Gains and Losses

▶ Attach to Form 1041, Form 5227, or Form 990-T.
▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.
▶ Go to www.irs.gov/F1041 for instructions and the latest information.

OMB No. 1545-0092

2017

Name of estate or trust MASON AND LULA COLE CHARITABLE TUA	Employer identification number 26-6779458
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Note: Form 5227 filers need to complete *only* Parts I and II.

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

See instructions for how to figure the amounts to enter on the lines below.
This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b .				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked	201,004.	216,999.		-15,995.
4 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824				4
5 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts				5
6 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2016 Capital Loss Carryover Worksheet				6 ()
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). Enter here and on line 17, column (3) on the back ▶				7 -15,995.

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

See instructions for how to figure the amounts to enter on the lines below.
This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b .				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked	1,293,967.	838,129.		455,838.
11 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824				11
12 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts				12
13 Capital gain distributions				13 11.
14 Gain from Form 4797, Part I				14
15 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2016 Capital Loss Carryover Worksheet				15 ()
16 Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h). Enter here and on line 18a, column (3) on the back ▶				16 455,849.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2017

Part III Summary of Parts I and II		(1) Beneficiaries' (see instr.)	(2) Estate's or trust's	(3) Total
Caution: Read the instructions before completing this part.				
17	Net short-term gain or (loss)	17		-15,995.
18	Net long-term gain or (loss):			
a	Total for year	18a		455,849.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht.)	18b		
c	28% rate gain	18c		
19	Total net gain or (loss) . Combine lines 17 and 18a ▶	19		439,854.

Note: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a). If lines 18a and 19, column (2), are net gains, go to Part V, and **don't** complete Part IV. If line 19, column (3), is a net loss, complete Part IV and the **Capital Loss Carryover Worksheet**, as necessary.

Part IV Capital Loss Limitation

20	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of: a The loss on line 19, column (3) or b \$3,000	20	()
-----------	--	-----------	-----

Note: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the **Capital Loss Carryover Worksheet** in the instructions to figure your capital loss carryover.

Part V Tax Computation Using Maximum Capital Gains Rates

Form 1041 filers. Complete this part **only** if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero.

Caution: Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if:

- Either line 18b, col. (2) or line 18c, col. (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.

Form 990-T trusts. Complete this part **only** if both lines 18a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if either line 18b, col. (2) or line 18c, col. (2) is more than zero.

21	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34).	21		
22	Enter the smaller of line 18a or 19 in column (2) but not less than zero	22		
23	Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T)	23		
24	Add lines 22 and 23	24		
25	If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0- . . . ▶	25		
26	Subtract line 25 from line 24. If zero or less, enter -0-	26		
27	Subtract line 26 from line 21. If zero or less, enter -0-	27		
28	Enter the smaller of the amount on line 21 or \$2,550	28		
29	Enter the smaller of the amount on line 27 or line 28	29		
30	Subtract line 29 from line 28. If zero or less, enter -0-. This amount is taxed at 0% ▶	30		
31	Enter the smaller of line 21 or line 26	31		
32	Subtract line 30 from line 26	32		
33	Enter the smaller of line 21 or \$12,500	33		
34	Add lines 27 and 30	34		
35	Subtract line 34 from line 33. If zero or less, enter -0-	35		
36	Enter the smaller of line 32 or line 35	36		
37	Multiply line 36 by 15% (0.15) ▶	37		
38	Enter the amount from line 31	38		
39	Add lines 30 and 36	39		
40	Subtract line 39 from line 38. If zero or less, enter -0-	40		
41	Multiply line 40 by 20% (0.20) ▶	41		
42	Figure the tax on the amount on line 27. Use the 2017 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)	42		
43	Add lines 37, 41, and 42	43		
44	Figure the tax on the amount on line 21. Use the 2017 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)	44		
45	Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 36) ▶	45		

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

Social security number or taxpayer identification number

MASON AND LULA COLE CHARITABLE TUA

26-6779458

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (E) Long-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
- (F) Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
5000.	AR ST DEV FA E 1.606 DUE 11/01/17 XTRO TAXBL	01/22/2014	01/11/2017	5,000.00	4,986.00			14.00
175.	APPLE INC	11/18/2015	02/01/2017	22,610.00	20,439.00			2,171.00
150.	ABBVIE INC	09/24/2009	02/09/2017	9,122.00	3,670.00			5,452.00
742.77	BNSF RAILWAY CO 5.6 DUE 04/01/24 BNSF	12/08/2014	04/01/2017	743.00	814.00			-71.00
35000.	VERIZON COMMUNICA 5 02/15/18	03/26/2008	04/24/2017	36,163.00	34,776.00			1,387.00
225.	DISH NETWORK CORP CLA	04/01/2010	05/10/2017	13,856.00	4,669.00			9,187.00
400.	MACYS INC	11/18/2015	05/11/2017	9,984.00	15,572.00			-5,588.00
50000.	GOLDMAN SACHS GROUP 03/11/16 2.250% 03/11/	03/08/2016	06/12/2017	50,000.00	50,000.00			
50.	AUTOZONE INC	04/30/2012	06/21/2017	28,763.00	19,827.00			8,936.00
100.	CAPITAL ONE FINL	10/19/2010	06/21/2017	8,075.00	3,874.00			4,201.00
250.	FOOT LOCKER INC	11/18/2015	06/21/2017	11,882.00	15,237.00			-3,355.00
350.	TARGET CORPORATION	07/13/2006	06/21/2017	17,843.00	18,372.00			-529.00
500.	WESTERN UNION CO	11/01/2012	06/21/2017	9,470.00	8,197.00			1,273.00
300.	ABBOTT LABORATORIES	01/28/2011	08/10/2017	14,526.00	6,693.00			7,833.00
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶								

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side	Social security number or taxpayer identification number
MASON AND LULA COLE CHARITABLE TUA	26-6779458

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Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (E) Long-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
- (F) Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	300. ABBVIE INC	01/28/2011	08/10/2017	21,249.00	6,979.00			14,270.00
	100. AMGEN INCORPORATED	04/09/2009	08/10/2017	17,008.00	4,763.00			12,245.00
	75. BLACKROCK INC	01/04/2012	08/10/2017	31,803.00	12,272.00			19,531.00
	31. BRIGHTHOUSE FINL INC C	08/04/2016	08/10/2017	1,802.00	1,471.00			331.00
	400. BRISTOL-MYERS SQUIBB	09/19/2013	08/10/2017	22,776.00	17,372.00			5,404.00
	300. CME GROUP INC CLASS A	01/04/2012	08/10/2017	37,294.00	15,762.00			21,532.00
	350. CVS HEALTH CORP	04/27/2006	08/10/2017	28,055.00	14,802.00			13,253.00
	250. CAPITAL ONE FINL	10/19/2010	08/10/2017	20,892.00	9,685.00			11,207.00
	400. CERNER CORP	12/01/2009	08/10/2017	24,687.00	7,675.00			17,012.00
	250. CISCO SYSTEMS INC	01/29/2009	08/10/2017	7,820.00	4,250.00			3,570.00
	100. CLOROX COMPANY	01/29/2009	08/10/2017	13,389.00	5,059.00			8,330.00
	200. COLGATE-PALMOLIVE CO	10/19/2010	08/10/2017	14,301.00	7,620.00			6,681.00
	800. CONOCOPHILLIPS	04/20/2009	08/10/2017	36,216.00	26,230.00			9,986.00
	2000. FORD MOTOR COMPANY	08/04/2016	08/10/2017	21,561.00	26,534.00			-4,973.00
<p>2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶</p>								

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

Social security number or taxpayer identification number

MASON AND LULA COLE CHARITABLE TUA

26-6779458

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You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (E) Long-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
- (F) Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
100.	GENERAL DYNAMICS CO	10/02/2007	08/10/2017	19,885.00	9,058.00			10,827.00
300.	GENERAL ELECTRIC CO	01/29/2009	08/10/2017	7,620.00	3,851.00			3,769.00
150.	HARRIS CORPORATION	01/29/2009	08/10/2017	17,747.00	6,507.00			11,240.00
250.	HOME DEPOT INC	07/07/2006	08/10/2017	38,707.00	6,796.00			31,911.00
100.	ILLINOIS TOOL WORKS	04/27/2006	08/10/2017	13,842.00	5,242.00			8,600.00
375.	IBM CORP	07/16/2007	08/10/2017	53,099.00	43,277.00			9,822.00
305.	ISHARES RUSSELL MID C	05/21/2009	08/10/2017	58,094.00	19,056.00			39,038.00
440.	ISHARES RUSSELL 2000	05/21/2009	08/10/2017	60,332.00	21,470.00			38,862.00
200.	LAS VEGAS SANDS CORP	11/18/2015	08/10/2017	12,068.00	9,156.00			2,912.00
100.	ELI LILLY & COMPANY	01/29/2009	08/10/2017	8,183.00	3,805.00			4,378.00
200.	LOWES COMPANIES INC	11/18/2015	08/10/2017	15,474.00	14,646.00			828.00
100.	MC DONALDS CORP	01/29/2009	08/10/2017	15,637.00	5,855.00			9,782.00
350.	METLIFE INC	08/04/2016	08/10/2017	16,446.00	12,277.00			4,169.00
125.	MURPHY USA INC	04/01/2010	08/10/2017	8,564.00	3,999.00			4,565.00
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶								

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

Social security number or taxpayer identification number

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Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (E) Long-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
- (F) Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
325.	PPL CORPORATION	05/18/2011	08/10/2017	12,571.00	8,224.00			4,347.00
300.	PHILLIPS 66	04/20/2009	08/10/2017	25,146.00	6,013.00			19,133.00
250.	PROCTER & GAMBLE	09/24/2009	08/10/2017	22,980.00	14,480.00			8,500.00
200.	PUB SVC ENTERPISE GP	09/19/2013	08/10/2017	9,119.00	6,569.00			2,550.00
2346.	SCHWAB EMERGING MARK ETF	11/18/2015	08/10/2017	61,113.00	49,313.00			11,800.00
300.	STERICYCLE INC	04/01/2010	08/10/2017	21,450.00	15,685.00			5,765.00
250.	TJX COMPANIES INC	11/18/2015	08/10/2017	17,582.00	17,109.00			473.00
200.	TEXAS INSTRUMENTS	04/01/2010	08/10/2017	16,167.00	4,922.00			11,245.00
225.	U G I CORPORATION	09/19/2013	08/10/2017	10,845.00	5,933.00			4,912.00
300.	UNION PACIFIC CORP	05/18/2011	08/10/2017	31,019.00	14,417.00			16,602.00
675.	VERIZON COMMUNICATN	09/24/2009	08/10/2017	32,433.00	19,193.00			13,240.00
150.	WALMART, INC	11/18/2015	08/10/2017	12,115.00	9,121.00			2,994.00
600.	WELLS FARGO & CO	04/21/2016	08/10/2017	31,343.00	32,466.00			-1,123.00
210.	CHUBB LIMITED	01/29/2009	08/10/2017	31,231.00	23,327.00			7,904.00
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶								

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

