

Form **990-PF**
 Department of the Treasury
 Internal Revenue Service

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

OMB No 1545-0052
2017
Open to Public Inspection

For calendar year 2017, or tax year beginning 01-01-2017 , and ending 12-31-2017

Name of foundation THE ENTERLINE FOUNDATION		A Employer identification number 03-6073689	
Number and street (or P O box number if mail is not delivered to street address) 2699 BUFORD HWY		B Telephone number (see instructions) (770) 271-3032	
City or town, state or province, country, and ZIP or foreign postal code BUFORD, GA 30518		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 747,184		J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	
		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

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)	348,146			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	17	17		
	4 Dividends and interest from securities	25,533	25,533		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	44,864			
	b Gross sales price for all assets on line 6a 485,572				
	7 Capital gain net income (from Part IV, line 2)		44,879		
	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)	38				
12 Total. Add lines 1 through 11	418,598	70,429			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits	1,640			1,640
	16a Legal fees (attach schedule)	14,200			14,200
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule)	88,003	4,120		83,883
	17 Interest				
	18 Taxes (attach schedule) (see instructions)				
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings	7,840			7,840
	22 Printing and publications				
	23 Other expenses (attach schedule)	56,823			56,823
	24 Total operating and administrative expenses. Add lines 13 through 23	168,506	4,120		164,386
	25 Contributions, gifts, grants paid	105,400			105,400
26 Total expenses and disbursements. Add lines 24 and 25	273,906	4,120		269,786	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	144,692				
b Net investment income (if negative, enter -0-)		66,309			
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	2,015	1,630	1,630
	2 Savings and temporary cash investments	3,888	215,016	215,016
	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)			
	b Investments—corporate stock (attach schedule)	195,375		
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	360,838	490,162	530,538
	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)	562,116	706,808	747,184	
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)		0	
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			
	28 Paid-in or capital surplus, or land, bldg , and equipment fund			
29 Retained earnings, accumulated income, endowment, or other funds	562,116	706,808		
30 Total net assets or fund balances (see instructions)	562,116	706,808		
31 Total liabilities and net assets/fund balances (see instructions) .	562,116	706,808		

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	562,116
2 Enter amount from Part I, line 27a	2	144,692
3 Other increases not included in line 2 (itemize) ▶ _____	3	
4 Add lines 1, 2, and 3	4	706,808
5 Decreases not included in line 2 (itemize) ▶ _____	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	706,808

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., 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)
1a See Additional Data Table				
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 See Additional Data Table				
b				
c				
d				
e				
(i) F M V as of 12/31/69			(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				
a See Additional Data Table				
b				
c				
d				
e				
			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
2 Capital gain net income or (net capital loss)			44,879	
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				

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 does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see 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	293,573	435,725	0.67376
2015	261,147	598,149	0.43659
2014	201,068	593,855	0.33858
2013	219,512	580,615	0.37807
2012	313,518	530,552	0.59093
2 Total of line 1, column (d)			2.417927
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			0.483585
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5			572,403
5 Multiply line 4 by line 3			276,806
6 Enter 1% of net investment income (1% of Part I, line 27b)			663
7 Add lines 5 and 6			277,469
8 Enter qualifying distributions from Part XII, line 4			269,786

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.

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 calculation. Includes fields for exempt foundations, domestic foundations, tax under section 511, subtitle A tax, and credits/payments. Total amount owed is 534, with 534 refunded.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Columns include question number, Yes, and No. Questions cover political activities, unrelated business income, liquidation, and state reporting requirements.

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-14 regarding controlled entities, distribution to donor advised funds, public inspection requirements, and books in care of.

Located at 2699 BUFORD HWY BUFORD GA ZIP+4 305186051

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.

Table with 3 columns: Question, Yes, No. Row 16 regarding interest in or authority over a bank, securities, or other financial account in a foreign country.

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.

Main table with 3 columns: Question, Yes, No. Rows 1a-4b regarding Form 4720 exceptions and requirements.

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			
	(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	No	
	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 checked="" type="checkbox"/> No	
	<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>			
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	No	
	<i>If "Yes" to 6b, file Form 8870</i>			
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	No	

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	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				

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	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000. ▶

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
SMI SERVICES INC 2699 BUFORD HWY BUFORD, GA 30518	COMMON PAYMASTER	135,480

Total number of others receiving over \$50,000 for professional services. ▶

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	
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	
2	
All other program-related investments See instructions	
3	

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	498,480
b	Average of monthly cash balances.	1b	82,640
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	581,120
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	581,120
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	8,717
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	572,403
6	Minimum investment return. Enter 5% of line 5.	6	28,620

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	28,620
2a	Tax on investment income for 2017 from Part VI, line 5.	2a	1,326
b	Income tax for 2017 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	1,326
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	27,294
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	27,294
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	27,294

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	269,786
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	
3	Amounts set aside for specific charitable projects that satisfy the		
a	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	269,786
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	269,786

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				27,294
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only.				
b Total for prior years 20___, 20___, 20___				
3 Excess distributions carryover, if any, to 2017				
a From 2012.	287,281			
b From 2013.	191,443			
c From 2014.	172,048			
d From 2015.	231,860			
e From 2016.	272,077			
f Total of lines 3a through e.	1,154,709			
4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ _____ 269,786				
a Applied to 2016, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2017 distributable amount.				27,294
e Remaining amount distributed out of corpus	242,492			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,397,201			
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).				
8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions).	287,281			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	1,109,920			
10 Analysis of line 9				
a Excess from 2013.	191,443			
b Excess from 2014.	172,048			
c Excess from 2015.	231,860			
d Excess from 2016.	272,077			
e Excess from 2017.	242,492			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

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 organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not 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					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the organization 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))
ENTERLINE LARRY L

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

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

Check here 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 (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed
THE ENTERLINE FOUNDATION
2699 BUFORD HWY
BUFORD, GA 30518
(770) 271-3032

b The form in which applications should be submitted and information and materials they should include
REFER TO OUR WEBSITE [WWW ENTERLINEFOUNDATION.ORG](http://WWW.ENTERLINEFOUNDATION.ORG) FOR GRANT DISTRIBUTION GUIDELINES / REQUIREMENTS

c Any submission deadlines
REFER TO OUR WEBSITE [WWW ENTERLINEFOUNDATION.ORG](http://WWW.ENTERLINEFOUNDATION.ORG)

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors
REFER TO OUR WEBSITE [WWW ENTERLINEFOUNDATION.ORG](http://WWW.ENTERLINEFOUNDATION.ORG) FOR GRANT RESTRICTIONS

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 Additional Data Table				
Total ▶ 3a				105,400
b <i>Approved for future payment</i>				
Total ▶ 3b				

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 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)
7500 FOXF	D	2016-12-14	2017-05-09
2500 FOXF	D	2017-12-12	2017-12-15
2500 FOXF	D	2017-12-12	2017-12-15
170 321 AMPFX	P	2015-12-31	2017-01-20
274 634 AMCFX	P	2015-12-31	2017-12-15
92 598 AMFFX	P	2015-12-31	2017-03-23
138 131 AMRFX	P	2015-12-31	2017-12-15
53 056 CWGFX	P	2015-12-31	2017-03-23
38 036 WGIFX	P	2015-12-31	2017-12-15
27 116 DHSIX	P	2015-12-31	2017-12-15

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(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)
241,186		195,375	45,811
96,305		99,250	-2,945
95,871		99,250	-3,379
4,723		4,384	339
9,008		7,501	1,507
3,444		2,888	556
5,883		4,683	1,200
2,394		1,868	526
2,022		1,634	388
960		819	141

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			45,811
			-2,945
			-3,379
			339
			1,507
			556
			1,200
			526
			388
			141

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 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)
173 611 HLMNX	P	2015-12-31	2017-12-15
164 399 HLMNX	P	2016-12-31	2017-03-23
83 994 PEGZX	P	2015-12-31	2017-03-23
195 924 PIFZX	P	2016-12-31	2017-01-20
147 186 PFORX	P	2015-12-31	2017-12-15
390 475 PIMIX	P	2015-12-31	2017-12-15
163 034 PDBZX	P	2015-12-31	2017-12-15
545 174 PHYZX	P	2015-12-31	2017-12-15
Wash Sale			

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(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)
3,875		3,230	645
3,074		2,805	269
3,052		3,036	16
2,163		2,248	-85
1,551		1,549	2
4,740		4,798	-58
2,321		2,369	-48
3,000		3,021	-21
			15

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			645
			269
			16
			-85
			2
			-58
			-48
			-21

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
ENTERLINE LARRY L 2699 BUFORD HWY BUFORD, GA 30518	Chairman 2 00	0		
PUGH KEITH E 3321 HADDON HALL DR BUFORD, GA 30519	Trustee 1 00	0		
RICHARDS KATHLEEN M 5808 LEGENDS CLUB CL BRASELTON, GA 30517	Trustee 1 00	0		
BAGA LOUIS S 14228 TRENTON AVE STRONGSVILLE, OH 44136	Trustee 2 00	0		
RIVERA ANTHONY P 3696 SUWANEE CREEK CT SUWANEE, GA 30024	Trustee 1 00	0		
THORNBERRY PHILLIP C 5174 SUNLAKE DR HOSCHTON, GA 30548	Trustee 1 00	0		
SUSAN BOLAND BUTTS 5045 JOHNS CREEK CT JOHNS CREEK, GA 30022	Executive Dir 1 00	0		

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

Recipient	If recipient is an individual, show any relationship to 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>				
PHI KAPPA TAU FOUNDATION 5221 MORNING SUN RD OXFORD, OH 45056	N/A	PUBLIC	GENERAL FUND / NO RESTRICTIONS	1,000
CLEVELAND STATE UNIVERSITY 2121 EUCLID AVE CLEVELAND, OH 44115	N/A	PUBLIC	SPECIAL NEED / SCHOLARSHIP FUNDING	12,000
DEEPWOOD FOUNDATION 8121 DEEPWOOD BLVD MENTOR, OH 44060	N/A	PUBLIC	GENERAL FUND / NO RESTRICTIONS	1,000
Total 3a				105,400

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

Recipient	If recipient is an individual, show any relationship to 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>				
HOLY ANGELS INCPO BOX 710 BELMONT, NC 28012	N/A	PUBLIC	GENERAL FUND / NO RESTRICTIONS	10,000
ANNANDALE AT SUWANEE INC 3500 ANNANDALE LN SUWANEE, GA 30024	N/A	PUBLIC	EVENT SPONSORSHIP - GENERAL FUND / NO RESTRICTIONS	5,300
NEW AVENUES TO INDEPENDENCE 17608 EUCLID AVE CLEVELAND, OH 44112	N/A	PUBLIC	EVENT SPONSORSHIP - GENERAL FUND / NO RESTRICTIONS	20,000
Total ▶ 3a				105,400

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

Recipient	If recipient is an individual, show any relationship to 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>				
DDD FOUNDATION 52 EXECUTIVE PARK SOUTH STE 5203 ATLANTA, GA 30329	N/A	PUBLIC	SPECIAL NEED / DENTIST SALARY SUPPORT	20,000
MAY INSTITUTE 1921 WHITTLESEY RD STE 400 COLUMBUS, GA 31904	N/A	PUBLIC	SPECIAL NEED / THUNDER IN THE VALLEY AIR SHOW OUTING TICKETS	2,500
MILESTONES AUTISM RESOURCES 23880 COMMERCE PARK STE 2 BEACHWOOD, OH 44122	N/A	PUBLIC	SPECIAL NEED / WEBSITE PROJECT	20,000
Total ▶				105,400
3a				

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

Recipient	If recipient is an individual, show any relationship to 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>				
SPECTRUM AUTISM SUPPORT GROUP INC PO BOX 3132 SUWANEE, GA 30024	N/A	PUBLIC	SPECIAL NEED / TECH & SOCIAL TRAINING PROGRAM	7,600
THE FRAZER CENTER 1815 S PONCE DE LEON AVE NE ATLANTA, GA 30307	N/A	PUBLIC	SPECIAL NEED / VAN PURCHASE	6,000
Total ▶ 3a				105,400

TY 2017 Contractor Compensation Explanation**Name:** THE ENTERLINE FOUNDATION**EIN:** 03-6073689**Software ID:** 17005038**Software Version:** 2017v2.2

Contractor	Explanation
SMI SERVICES INC	SMI SERVICES INC IS REIMBURSED FOR ACTUAL COSTS INCURRED FOR COMPENSATION PAID TO INDIVIDUALS OR INDEPENDENT CONTRACTORS WORKING ON BEHALF OF THE FOUNDATION. DURING 2017 THE FOLLOWING COSTS WERE INCURRED: SALARIES, WAGES & BENEFITS 51,597 PROJECTS CONSULTANT 83,883 TOTAL 135,480

TY 2017 Investments - Other Schedule

Name: THE ENTERLINE FOUNDATION

EIN: 03-6073689

Software ID: 17005038

Software Version: 2017v2.2

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
AMPFX - AMCAP FUND	AT COST		
AMFFX - AMER MUTUAL FUND	AT COST		
CWGFX - CAPITAL WORLD GROWTH & INCOME FD	AT COST		
PEGZX - PRUDENTIAL JENNISON MID-CAP GROW	AT COST	40,360	42,516
PHYZX - PRUDENTIAL HIGH YIELD CL Z	AT COST	42,540	42,355
PIFZX - PRUDENTIAL ST CORP BOND CL Z	AT COST	43,947	42,464
PDBZX - PRUDENTIAL TOTAL RET BOND CL Z	AT COST	53,336	53,397
ROUNDING / WASH SALE ADJUSTMENT	AT COST	157	
DHSIX - DIAMOND HILL SMALL CAP FUND CL I	AT COST	23,829	26,819
HLMNX - HARDING LOEVNER INTL EQUITY PORT	AT COST		
PFORX - PIMCO FOREIGN BOND FUND - HEDGED	AT COST	26,250	26,299
PIMIX - PIMCO INCOME FUND INSTITUTIONAL	AT COST	68,680	69,090
AMCFX - AMERICAN AMCAP FUND F2	AT COST	73,241	84,520
WGIFX - AMERICAN CAPITAL WORLD GR & INC	AT COST	20,607	25,556
AMRFX - AMERICAN MUTUAL FUND CL F2	AT COST	53,519	63,803
HLMIX - HARDING LOEVER INTL EQUITY PORT	AT COST	44,010	53,719

TY 2017 Legal Fees Schedule**Name:** THE ENTERLINE FOUNDATION**EIN:** 03-6073689**Software ID:** 17005038**Software Version:** 2017v2.2

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
GRIER FURR & CRISP PA	14,200	0	0	14,200

TY 2017 Other Expenses Schedule**Name:** THE ENTERLINE FOUNDATION**EIN:** 03-6073689**Software ID:** 17005038**Software Version:** 2017v2.2**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
AUTO EXPENSES	1,500			1,500
BANK SERVICE CHARGES	228			228
DUES	55			55
ENTERTAINMENT	2,478			2,478
GIFTS	298			298
LICENSES - BUSINESS	50			50
MANAGEMENT FEES - SUPERVISORY	45,977			45,977
MISCELLANEOUS / ROUNDING	4			4
OVERNIGHT DELIVERIES	117			117
POSTAGE - USPS	16			16

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
SERVICE FEES - CLIENTS	3,980			3,980
SUPPLIES	1,641			1,641
WEBSITE EXPENSES	479			479

TY 2017 Other Income Schedule**Name:** THE ENTERLINE FOUNDATION**EIN:** 03-6073689**Software ID:** 17005038**Software Version:** 2017v2.2**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
SHREDDING SERVICES	38		

TY 2017 Other Professional Fees Schedule**Name:** THE ENTERLINE FOUNDATION**EIN:** 03-6073689**Software ID:** 17005038**Software Version:** 2017v2.2

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT ADVISORY FEES	4,120	4,120	0	0
PROJECTS CONSULTANT	83,883	0	0	83,883

Schedule B
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors
▶ Attach to Form 990, 990-EZ, or 990-PF
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at
www.irs.gov/form990

OMB No 1545-0047
2017

Name of the organization
THE ENTERLINE FOUNDATION

Employer identification number
03-6073689

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

- 501(c)() (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹ 3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc , contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution. An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization THE ENTERLINE FOUNDATION	Employer identification number 03-6073689
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Part I **Contributors** (See instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ENTERLINE LARRY L 2699 BUFORD HWY BUFORD, GA 30518	\$ 198,500	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>
2	VULCAN HOLDINGS INC 2699 BUFORD HWY BUFORD, GA 30518	\$ 149,446	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>

Name of organization THE ENTERLINE FOUNDATION	Employer identification number 03-6073689
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Part II Noncash Property (See instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	5,000 SHARES - FOXF (FOX FACTORY HOLDING CORP)	\$ 198,500	2017-12-12
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization THE ENTERLINE FOUNDATION	Employer identification number 03-6073689
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____ _____	_____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____ _____	_____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____ _____	_____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____ _____	_____ _____