

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

For calendar year 2015 or other tax year beginning NOV 1, 2015, and ending OCT 31, 2016

2015

Department of the Treasury Internal Revenue Service

Information about Form 990-T and its instructions is available at www.irs.gov/form990t.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Form header section including: A Check box if address changed; B Exempt under section 501(c)(3); C Book value of all assets at end of year; Name of organization; Print or Type; Number, street, and room or suite no.; City or town, state or province, country, and ZIP or foreign postal code; D Employer identification number; E Unrelated business activity codes.

F Group exemption number; G Check organization type (501(c) corporation, 501(c) trust, 401(a) trust, Other trust)

H Describe the organization's primary unrelated business activity. NONE

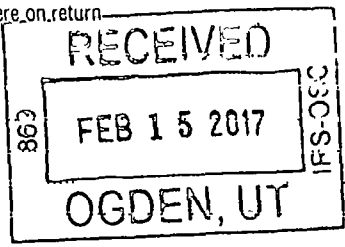
I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? If "Yes," enter the name and identifying number of the parent corporation.

J The books are in care of TEENIE HUTCHISON Telephone number 334-956-8349

Table with 4 columns: Part I Unrelated Trade or Business Income, (A) Income, (B) Expenses, (C) Net. Rows include Gross receipts or sales, Less returns and allowances, Cost of goods sold, Gross profit, Capital gain net income, Net gain (loss), Capital loss deduction for trusts, Income (loss) from partnerships and S corporations, Rent income, Unrelated debt-financed income, Interest, annuities, royalties, and rents from controlled organizations, Investment income, Exploited exempt activity income, Advertising income, Other income, Total.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Except for contributions, deductions must be directly connected with the unrelated business income)

Table with 4 columns: Line number, Description, Line number, Amount. Rows include Compensation of officers, directors, and trustees; Salaries and wages; Repairs and maintenance; Bad debts; Interest; Taxes and licenses; Charitable contributions; Depreciation; Less depreciation claimed on Schedule A and elsewhere on return; Depletion; Contributions to deferred compensation plans; Employee benefit programs; Excess exempt expenses; Excess readership costs; Other deductions; Total deductions; Unrelated business taxable income before net operating loss deduction; Net operating loss deduction; Unrelated business taxable income before specific deduction; Specific deduction; Unrelated business taxable income.



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Part III Tax Computation

35 Organizations Taxable as Corporations See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here [] See instructions and: a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order): (1) \$ (2) \$ (3) \$ b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ (2) Additional 3% tax (not more than \$100,000) \$ c Income tax on the amount on line 34 35c 0. 36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from: [] Tax rate schedule or [] Schedule D (Form 1041) 36 37 Proxy tax See instructions 37 38 Alternative minimum tax 38 39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies 39 0.

Part IV Tax and Payments

40a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 40a 40b Other credits (see instructions) 40b 40c General business credit. Attach Form 3800 40c 40d Credit for prior year minimum tax (attach Form 8801 or 8827) 40d 40e Total credits. Add lines 40a through 40d 40e 41 Subtract line 40e from line 39 41 0. 42 Other taxes. Check if from: [] Form 4255 [] Form 8611 [] Form 8697 [] Form 8866 [] Other (attach schedule) 42 43 Total tax. Add lines 41 and 42 43 0. 44a Payments: A 2014 overpayment credited to 2015 44a 44b 2015 estimated tax payments 44b 44c Tax deposited with Form 8868 44c 44d Foreign organizations: Tax paid or withheld at source (see instructions) 44d 44e Backup withholding (see instructions) 44e 44f Credit for small employer health insurance premiums (Attach Form 8941) 44f 44g Other credits and payments: [] Form 2439 [] Form 4136 [] Other Total 44g 45 Total payments. Add lines 44a through 44g 45 46 Estimated tax penalty (see instructions). Check if Form 2220 is attached [] 46 47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed 47 0. 48 Overpayment If line 45 is larger than the total of lines 43 and 46, enter amount overpaid 48 0. 49 Enter the amount of line 48 you want: Credited to 2016 estimated tax [] Refunded [] 49

Part V Statements Regarding Certain Activities and Other Information (see instructions)

1 At any time during the 2015 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here SEE STATEMENT 3 2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file 3 Enter the amount of tax-exempt interest received or accrued during the tax year \$

Schedule A - Cost of Goods Sold. Enter method of inventory valuation N/A

1 Inventory at beginning of year 1 2 Purchases 2 3 Cost of labor 3 4a Additional section 263A costs (att schedule) 4a b Other costs (attach schedule) 4b 5 Total. Add lines 1 through 4b 5 6 Inventory at end of year 6 7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2 7 8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? Yes No

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Signature of officer [Signature] Date 11/26/17 Title SECRETARY/TREASURER May the IRS discuss this return with the preparer shown below (see instructions)? [X] Yes [] No

Paid Preparer Use Only

Print/Type preparer's name Preparer's signature Date Check [] if self-employed PTIN LUCINDA S. CHAPPELLE LUCINDA S. CHAPPELLE 01/04/17 P00187613 Firm's name JACKSON THORNTON & CO., PC Firm's EIN 63-1035228 PO BOX 96 Firm's address MONTGOMERY, AL 36101-0096 Phone no. 334-834-7660

FORM 990-T

INCOME (LOSS) FROM PARTNERSHIPS
AND S CORPORATIONS

STATEMENT 1

DESCRIPTION

AMOUNT

PALLADIAN PARTNERS V-A, LLC	18,590.
HIGHFIELDS CAPITAL IV, LP	14,523.
BAUPOST VALUE PARTNERS, LP - III	123,040.
COMMONFUND CAPITAL NATURAL RESOURCES PARTNERS VIII	-33,211.
AUDAX MAZZANINE FUND II L P	1,261.
YORKTOWN ENERGY PARTNERS IX, L. P.	-127,370.
DENHAM COMMODITY PARTNERS	2,435.
LEXINGTON CAPITAL PARTNERS VII, L. P.	3,344.
COMMONFUND CAPITAL VENTURE PARTNER IX	188.
AMBERBROOK VI, LLC	-3,037.
DCPF VI OIL AND GAS COINVESTMENT FUND, L. P.	11,578.
CONTRARIAN DISTRESSED REAL ESTATE FUND II, L. P.	1,631.
LEGACY VENTURES VI	-159.
ENR PARTNERS	-16,311.
TOTAL TO FORM 990-T, PAGE 1, LINE 5	-3,498.

FORM 990-T

NET OPERATING LOSS DEDUCTION

STATEMENT 2

TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
10/31/07	20,331.	20,331.	0.	0.
10/31/08	81,261.	81,261.	0.	0.
10/31/09	120,066.	62,462.	57,604.	57,604.
10/31/10	114,965.	0.	114,965.	114,965.
10/31/11	103,348.	0.	103,348.	103,348.
10/31/13	209,371.	0.	209,371.	209,371.
10/31/14	29,336.	0.	29,336.	29,336.
10/31/15	262,536.	0.	262,536.	262,536.
NOL CARRYOVER AVAILABLE THIS YEAR			777,160.	777,160.

FORM 990-T

NAME OF FOREIGN COUNTRY IN WHICH
ORGANIZATION HAS FINANCIAL INTEREST

STATEMENT 3

NAME OF COUNTRY

CAYMAN ISLANDS
BRITISH VIRGIN IS
BERMUDA