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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.

Department of the Treasury Internal Revenue Service

▶ Information about Form 990-PF and its separate instructions is at www irs gov/form990pf.

| For c | alen | dar year 2013 or tax year beginning | | , and ending | ** * | | | | |
|--|----------|--|---------------------------------------|------------------------------|---|--|--|--|--|
| Nan | e of | foundation | - | | A Employer identification | number | | | |
| TI | ΙE | MT. BRILLIANT FAMILY FO | UNDATION | | | | | | |
| THE MT. BRILLIANT FAMILY FOUNDATION (FORMERLY HGG FAMILY FOUNDATION) Number and street (or PO box number if mail is not delivered to street address) Room/suite B Telephone number | | | | | | | | | |
| Num | ber an | d street (or P O box number if mail is not delivered to street ac | | | | | | | |
| _3: | 314 | HUFFMAN MILL PIKE | | | (859) 293- | 1991 | | | |
| | | wn, state or province, country, and ZIP or foreign popularity, ${	t KY} {	t 40511}$ | ostal code | | C If exemption application is p | pending, check here | | | |
| | | all that apply: Initial return | Initial return of a fo | ormer public charity | D 1. Foreign organization | s, check here | | | |
| • | | Final return | Amended return | | J | ., | | | |
| | | Address change | Name change | | Foreign organizations me check here and attach co | eeting the 85% test, | | | |
| H C | neck | type of organization: X Section 501(c)(3) exc | | | 7 | | | | |
| <u> </u> | _ | | Other taxable private founda | tion | E If private foundation sta under section 507(b)(1 | | | | |
| L Fai | | rket value of all assets at end of year J Accounting | | Accrual | 1 | | | | |
| - | | · | her (specify) | Accidai | F If the foundation is in a under section 507(b)(1 | | | | |
| (ire | | Part II, col. (c), line 16) 3,313,063. (Part I, colur | | | under Section 307(D)(1 |)(D), Check liefe | | | |
| | rt I | | | | (a) Adverted not | (d) Disbursements | | | |
| [1 4 | <u> </u> | (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | for charitable purposes (cash basis only) | | | |
| $\overline{}$ | 1 | Contributions, gifts, grants, etc., received | 800,000. | | N/A | (333.1 333.5 3111)) | | | |
| | 2 | Check It the foundation is not required to attach Sch. B | 0.0,000. | | | | | | |
| | 3 | Interest on savings and temporary | 848. | 848. | | STATEMENT 1 | | | |
| { | A | cash investments Dividends and interest from securities | 66,680. | 66,680. | | STATEMENT 2 | | | |
| | 4 50 | Gross rents | 00,000. | - 00,000. | | DIMIDMENT 2 | | | |
| - 1 | _ | Net rental income or (loss) | | | | | | | |
| | | | · · · · · · · · · · · · · · · · · · · | | 50 0VII 1 | | | | |
| 희 | 0a | Net gain or (loss) from sale of assets not on line 10 Gross sales price for all | | | <u> </u> | | | | |
| evenue | 7 | assets on line 6a | | 70 | 4 | | | | |
| Re Pe | 7 | Capital gain net income (from Part IV, line 2) | | | | + | | | |
| | 8 | Net short-term capital gain | | | ~ Z | | | | |
| | 9 | Income modifications Gross sales less returns | · · · · · · · | <u> </u> | 1111 | | | | |
| | | and allowances | | K) | | | | | |
| | | Less Cost of goods sold | ं (न्न | اننا | 공 호 | | | | |
| | | Gross profit or (loss) | | | | | | | |
| | 11 | Other income | 867,528. | 67 520 | | - | | | |
| | 12 | Total. Add lines 1 through 11 | 0. | 67,528 | | | | | |
| - 1 | 13 | Compensation of officers, directors, trustees, etc | U • | | | 0. | | | |
| | 14 | Other employee salaries and wages | | | | | | | |
| | | Pension plans, employee benefits | C10 | | | <u></u> | | | |
| sec | | Legal fees STMT 3 | 610. | 0. | | 610. | | | |
| Se L | | Accounting fees STMT 4 | 11,860. | 6,523. | | 5,337. | | | |
| Ĕ | | Other professional fees STMT 5 | 9,693. | 9,551. | · | 142. | | | |
| Administrative Expense | | Interest | 4 742 | 0.040 | <u> </u> | | | | |
| rat | | Taxes STMT 6 | 4,743. | 2,943. | | 0. | | | |
| nist | 19 | Depreciation and depletion | | | | _ | | | |
| Ë | | Occupancy | | | | | | | |
| | 21 | Travel, conferences, and meetings | | - <u>-</u> . | | | | | |
| and | 22 | Printing and publications | | · | - | | | | |
| | 23 | Other expenses | | | | | | | |
| Operating | 24 | Total operating and administrative | 06.006 | 40 04- | | | | | |
| ber | | expenses. Add lines 13 through 23 | 26,906. | 19,017. | · | 6,089. | | | |
| 0 | 20 | Contributions, gifts, grants paid | 842,913. | | | 842,913. | | | |
| | 26 | Total expenses and disbursements. | | | | | | | |
| | | Add lines 24 and 25 | 869,819. | 19,017 | | 849,002. | | | |
| | 27 | Subtract line 26 from line 12: | | | | | | | |
| | a | Excess of revenue over expenses and disbursements | -2,291. | | | | | | |
| | Ь | Net investment income (if negative, enter -0-) | | 48,511 | | | | | |
| | C | Adjusted net income (if negative, enter -0-) | | | N/A | | | | |

SCANNED NOV 2 8 2014

LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2013) \

| Form | 990-PF | (2013) | |
|-------|--------|--------|--|
| FULLI | 990-6 | (2010) | |

(FORMERLY HGG FAMILY FOUNDATION)

| Fo | r n ì 99 | 00-PF(2013) (FORMERLY HGG FAMILY FOU | NDATION) | 26-1 | L093418 Page 2 |
|------------------|-----------------|---|-------------------|---|---------------------------------------|
| F | art | Balance Sheets Atlached schedules and amounts in the description | Beginning of year | End of | |
| 뜨 | <u> </u> | column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash - non-interest-bearing | 895,693. | 747,272. | |
| | 2 | Savings and temporary cash investments | | | |
| | | Accounts receivable | | | |
| | | Less: allowance for doubtful accounts ▶ | | | |
| | 4 | Pledges receivable ▶ | | - | |
| | ' | Less: allowance for doubtful accounts | | | |
| | 5 | Grants receivable | | | |
| | ٦ | Receivables due from officers, directors, trustees, and other | | | |
| | " | | | | |
| | _ | disqualified persons | | | |
| | ′ | Other notes and loans receivable | | | |
| | ١. | Less: allowance for doubtful accounts | | | |
| ssets | 8 | Inventories for sale or use | | | - |
| SS | 9 | Prepaid expenses and deferred charges | | | |
| ٩ | 1 | Investments - U.S. and state government obligations | 4 660 600 | | · · · · · · · · · · · · · · · · · · · |
| | 1 | Investments - corporate stock STMT 7 | 1,668,638. | 1,814,768. | 2,565,791. |
| | C | Investments - corporate bonds | | | |
| | 11 | Investments - land, buildings, and equipment basis | | | |
| | | Less accumulated depreciation | | | |
| | 12 | Investments - mortgage loans | | | |
| | 13 | Investments - other | | | |
| | 14 | Land, buildings, and equipment: basis | | | |
| | ŀ | Less accumulated depreciation | | | |
| | 15 | Other assets (describe ►) | | | |
| | 16 | Total assets (to be completed by all filers - see the | | | |
| | | instructions. Also, see page 1, item 1) | 2,564,331. | 2,562,040. | 3,313,063. |
| | 17 | Accounts payable and accrued expenses | 15. | 15. | |
| | 18 | Grants payable | | | |
| S | 19 | Deferred revenue | | | |
| ij. | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| iabilitie | 21 | Mortgages and other notes payable | | - · · · · · · · · · · · · · · · · · · · | |
| ۳. | | Other liabilities (describe) | | | |
| | | | | | |
| | 23 | Total liabilities (add lines 17 through 22) | 15. | 15. | |
| | | Foundations that follow SFAS 117, check here | | | |
| | | and complete lines 24 through 26 and lines 30 and 31. | | | |
| S | 24 | Unrestricted | | | |
| Š | 25 | Temporarily restricted | | | • |
| Sala | 26 | Permanently restricted | | | |
| 절 | " | Foundations that do not follow SFAS 117, check here | | | |
| or Fund Balances | | and complete lines 27 through 31. | | | |
| ō | 27 | Capital stock, trust principal, or current funds | 0. | 0. | |
| ets | 28 | Paid-in or capital surplus, or land, bldg., and equipment fund | 0. | 0. | |
| Assets | 29 | Retained earnings, accumulated income, endowment, or other funds | 2,564,316. | 2,562,025. | |
| Net / | 30 | Total net assets or fund balances | 2,564,316. | 2,562,025. | |
| Ž | " | Total liet assets of fully balances | 2,304,310. | 2,302,023. | |
| | 31 | Total liabilities and net assets/fund balances | 2,564,331. | 2,562,040. | |
| Ξ | | | | 2,302,0408 | |
| ഥ | art | Analysis of Changes in Net Assets or Fund Bal | ances | | |
| 1 | Tota | net assets or fund balances at beginning of year - Part II, column (a), line 3 | 0 | | |
| | (mus | st agree with end-of-year figure reported on prior year's return) | | 1 | 2,564,316. |
| 2 | Ente | r amount from Part I, line 27a | | 2 | -2,291. |
| 3 | Othe | r increases not included in line 2 (itemize) | | 3 | 0. |
| 4 | Add | lines 1, 2, and 3 | | 4 | 2,562,025. |
| 5 | Decr | eases not included in line 2 (itemize) | | 5 | 0. |
| 6 | Total | net assets or fund balances at end of year (fine 4 minus line 5) - Part II, col | umn (h) line 30 | 6 | 2.562.025. |

Form **990-PF** (2013)

| (a) List and des 2-story brick v | scribe the ki varehouse; | nd(s) of property sold (e.g or common stock, 200 sh | ,, real estate, s. MLC Co.) | | (b) H P - D - | ow acquired Purchase Donation | (c) Date (mo., d | acquired ay, yr.) | (d) Date sold (mo., day, yr.) |
|--|--|--|--------------------------------|--------------------|-----------------------------|---------------------------------------|---------------------|-----------------------------|----------------------------------|
| <u> 1a</u> | | | | | | | | | |
| b NO | ONE | _· | | | <u> </u> | | | | |
| <u>C</u> | - | | | | ╂ | | - | | |
| <u>d</u> | | | | · | ╁ | | | | |
| <u>e</u> | (6) | Depression allowed | (a) Coo | t or other basis | <u></u> | | (b) C | our or (loss | |
| (e) Gross sales price | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | Depreciation allowed (or allowable) | | xpense of sale | | | | ain or (loss s (f) minus | |
| <u>a</u> | | · | <u> </u> | | } | | | | |
| <u>b</u> | | | | | | | | | |
| <u>c</u> | | | | | | · · · · · · · · · · · · · · · · · · · | | | · |
| <u>a</u> | | | <u> </u> | | - | | | | |
| Complete only for assets show | nua dain in | column (h) and owned by | the foundation | on 12/31/69 | - | | N Gains (C | Col. (h) gain | minus |
| | | (j) Adjusted basis | T- | cess of col. (I) | | co | l. (k), but ı | not less tha | n -0-) or |
| (i) F.M.V. as of 12/31/69 | | as of 12/31/69 | over | col. (j), if any | | | Losses | (from col. (| (h)) |
| <u>a</u> | | | _ | | | | | | |
| <u>b</u> | | | | | | | | | |
| <u>c</u> | | | | | | | | | |
| <u>d</u> | | | | | \dashv | ··· | | | |
| <u> </u> | | ∫ If gain, also ente | r in Dort I. line | 7 | 7 | | | | |
| 2 Capital gain net income or (net | capital loss | |)- ın Part I, ime | 7 | • | 2 | | | |
| 3 Net short-term capital gain or (I | nee) as def | • | | | 1 | | | | - |
| If gain, also enter in Part I, line | | | nu (0). | | ĴΙ | | | | |
| If (loss), enter -0- in Part I, line | 8 | | | | | 3 | | | |
| Part V Qualification | | | | | | | ome | | |
| (For optional use by domestic priva | ate foundati | ons subject to the section | 4940(а) tax оп | net investment in | come.) |) | | | |
| If section 4940(d)(2) applies, leave | this part bl | ank. | | | | | | | |
| | | | navat of any va | or in the bose nor | rio dO | | | | Yes X No |
| Was the foundation liable for the se If "Yes," the foundation does not qu | | | | • | ilou r | | | | Yes _A_ NO |
| 1 Enter the appropriate amount in | | | | | ntries. | | | | - |
| (a) | | (b) | | | (c) | | | Distri | (d) bution ratio |
| Base periód years Calendar year (or tax year begin | ning in) | Adjusted qualifying dis | | Net value of no | onchari | table-use assets | | (col. (b) div | vided by col. (c)) |
| 2012 | | 99 | 6,515. | | | 560,791 | | | .389143 |
| 2011 | | | 0,356. | | | 109,066 | | | .540692 |
| 2010 | | | 0,171. | | 1, | 031,426 | | | .843658 |
| 2009 | | | 2,932. | | | 433,170 | | | 1.345735 |
| 2008 | | 43 | 9,603. | | | 4,020 | | | <u> 109.353980</u> |
| | | | | | | | | | 110 452000 |
| 2 Total of line 1, column (d) | | | | | | | 2 | | 112.473208 |
| 3 Average distribution ratio for th | - | | on line 2 by 5, | or by the number | r of yea | rs | | | 22 424646 |
| the foundation has been in exis | tence if less | than 5 years | | | | | 3 | | 22.494642 |
| 4. Folian the autombourt management | -61 | f 0040 f David V | leas E | | | | | • | 2 500 220 |
| 4 Enter the net value of noncharit | abie-use as | sets for 2013 from Part X, | iine o | | | | 4 | ļ | <u>2,509,239</u> . |
| 5 Multiply line 4 by line 3 | | | | | | | 5 | 5 | 6,444,433. |
| with the stay into 0 | | | | | | | - | <u>-</u> | -,-==,= |
| 6 Enter 1% of net investment inco | ome (1% of | Part I, line 27b) | | | | | 6 | | 485. |
| | (51 | - ·, ···· * - · -, | - | | | | | | |
| 7 Add lines 5 and 6 | | | | | | | 7 | 5 | 6,444,918 |
| | | | | | | | | | |
| | | | | | | | | | |
| 8 Enter qualifying distributions fr | om Part XII | , line 4 | | | | | 8 | <u> </u> | 849,002 |

THE MT. BRILLIANT FAMILY FOUNDATION (FORMERLY HGG FAMILY FOUNDATION) 26-1093418 Page 4 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) Part VI 1a Exempt operating foundations described in section 4940(d)(2), check here
Image: and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) 970. b Domestic foundations that meet the section 4940(e) requirements in Part V, check here

and enter 1% 1 of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). 0. Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2 970. 3 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 0. 970. Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-5 6 Credits/Payments: 979. a 2013 estimated tax payments and 2012 overpayment credited to 2013 6a b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6с 6d d Backup withholding erroneously withheld 979. 7 Total credits and payments, Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here _____ if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed q 9. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 11 Enter the amount of line 10 to be: Credited to 2014 estimated tax 9 - Refunded ▶ 11 Part VII-A | Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in X any political campaign? 1a X b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1b If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. X c Did the foundation file Form 1120-POL for this year? 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year; (1) On the foundation. > \$ 0 • (2) On foundation managers. ▶ \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ _ X 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 If "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 3 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A b If "Yes," has it filed a tax return on Form 990-T for this year? 4b 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 If "Yes." attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law X remain in the governing instrument? 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 7 X

Form 990-PF (2013)

X

8b

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

of each state as required by General Instruction G? If "No," attach explanation

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)

year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

THE MT. BRILLIANT FAMILY FOUNDATION

| | 1990-PF (2013) (FORMERLY HGG FAMILY FOUNDATION) 26-10 | 93418 | | Page 5 |
|----|---|------------|-------------|---------------|
| Pa | rt 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 | | Х |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? | | | |
| 40 | If "Yes," attach statement (see instructions) | 12 | | <u>X</u> |
| 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 ► THE MT. BRILLIANT FAMILY FDTN Telephone no. ►859 | 293-1 | 991 | |
| 14 | | 40511 | <i>33</i> 1 | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here | #02II | | $\overline{}$ |
| 13 | and enter the amount of tax-exempt interest received or accrued during the year | N | /A | |
| 16 | At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank, | | Yes | No |
| 10 | securities, or other financial account in a foreign country? | 16 | 1 63 | X |
| | See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign | 10 | | |
| | country | | | |
| Pa | ort 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. | | Yes | No |
| 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? | 0 | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | |
| | a disqualified person? Yes X N | 0 | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | 0 | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | 0 | | |
| | (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)? | 0 | | |
| | (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.) | 0 | | |
| 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)? | 1 <u>b</u> | | |
| | 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 2013? | 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)): | | | |
| а | At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning | | | |
| | before 2013? | 0 | | |
| | If "Yes," list the years \blacktriangleright ,,,, | | | |
| 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 | <u> </u> | | |
| | statement - see instructions.) N/A | 2b | | |
| C | : If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | | | |
| | > | | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | | |
| | during the year? | 0 | | |
| b | olf "Yes," did it have excess business holdings in 2013 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 | İ | | |
| | 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, | <u> </u> | L | |
| | Form 4720, to determine if the foundation had excess business holdings in 2013.) | 3b | | |
| | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | <u> </u> |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that | <u> </u> | | |
| | had not been removed from jeopardy before the first day of the tax year beginning in 2013? | 4ь | 1 | X |

4b X Form **990-PF** (2013)

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

| Form 990-PF | | | 6-1093418 Page 7 |
|---------------|--|---------------------------------------|------------------|
| Part VIII | Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued) | dation Managers, Highly | |
| 3 Five high | hest-paid independent contractors for professional services. If none, en | ter "NONE." | |
| | (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| | NONE | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | · · · · · · · · · · · · · · · · · · · | | |
| | | ····· | |
| | | | |
| | | | |
| Total numbe | r of others receiving over \$50,000 for professional services | | > 0 |
| Part IX- | A Summary of Direct Charitable Activities | | |
| | dation's four largest direct charitable activities during the tax year. Include relevant standarions and other beneficiaries served, conferences convened, research papers p | | Expenses |
| 1 | N/A | | |
| | | | |
| | | | |
| 2 | | | |
| - | | | |
| | | | |
| 3 | | | |
| | | | |
| 4 | | | |
| | | | |
| | | | |
| | Summary of Program-Related Investments | | |
| | two largest program-related investments made by the foundation during the tax year | on lines 1 and 2. | Amount |
| 1 | N/A | | |
| | | | |
| 2 | | · · · · · · · · · · · · · · · · · · · | |
| | | | |
| | | | |
| All other pro | gram-related investments. See instructions. | | |
| 3 | | | |
| | | | |

Total. Add lines 1 through 3

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Forth 990-PF (2013) (FORMERLY HGG FAMILY FOUNDATION) 26-1093418 Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes; 1,847,993. a Average monthly fair market value of securities 1a b Average of monthly cash balances 699,458. 1b c Fair market value of all other assets 1c 2,547,451. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1e 0. Acquisition indebtedness applicable to line 1 assets 2 Subtract line 2 from line 1d 3 3 212. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 38. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 509,239 5 Minimum investment return. Enter 5% of line 5 125,462 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.) 125,462. Minimum investment return from Part X, line 6 970. Tax on investment income for 2013 from Part VI, line 5 2a Income tax for 2013. (This does not include the tax from Part VI.) 2b 970 Add lines 2a and 2b 2c Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 Add lines 3 and 4 5 5 6 Deduction from distributable amount (see instructions) 6 $\overline{124}$ Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 492 Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 849,002. Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 2 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) 3ь

Form **990-PF** (2013)

849,002

4

6

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

income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2012 | (c) 2012 | (d) 2013 |
|--|---------------|---------------------------------------|-------------|-------------|
| 1 Distributable amount for 2013 from Part XI, | | F 13. 35 - 13. | | |
| line 7 | | | | 124,492. |
| 2 Undistributed income, if any, as of the end of 2013 | } | | 0. | |
| a Enter amount for 2012 only | | | <u> </u> | |
| b Total for prior years: | | 0. | | |
| 3 Excess distributions carryover, if any, to 2013: | | | | |
| a From 2008 439, 402. | | | | |
| b From 2009 561, 296. | | | | |
| c From 2010 818,890. | | | | |
| dFrom 2011 1,035,400. | | | | |
| e From 2012 869,393. | | | | |
| f Total of lines 3a through e | 3,724,381. | | | |
| 4 Qualifying distributions for 2013 from | 3,721,301. | | | |
| Part XII, line 4: ►\$849,002. | | | | |
| a Applied to 2012, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior | | | <u>··</u> | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | | | | |
| • | 0. | | | |
| (Election required - see instructions) | | | | 124,492. |
| d Applied to 2013 distributable amount e Remaining amount distributed out of corpus | 724,510. | | | 124,472. |
| · | 724,510. | | | 0. |
| 5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a)) | 0. | | | |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 4,448,891. | | | |
| b Prior years' undistributed income. Subtract | | · · · · · · · · · · · · · · · · · · · | <u> </u> | |
| line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' | | | | |
| undistributed income for which a notice of | | | ļ | |
| deficiency has been issued, or on which | | | | |
| the section 4942(a) tax has been previously assessed | | 0. | | |
| d Subtract line 6c from line 6b. Taxable | | | | |
| amount - see instructions | | 0. | | |
| e Undistributed income for 2012. Subtract line | | | | |
| 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2013. Subtract | <u>,</u> - | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2014 | | | | 0. |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) | 0. | | _ | |
| 8 Excess distributions carryover from 2008 | | | | |
| not applied on line 5 or line 7 | 439,402. | | | |
| 9 Excess distributions carryover to 2014. | | | | |
| Subtract lines 7 and 8 from line 6a | 4,009,489. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2009 561,296. | | | | |
| b Excess from 2010 818,890. | | | | |
| c Excess from 2011 1,035,400. | | | | |
| d Excess from 2012 869,393. | | | | |
| e Excess from 2013 724, 510. | | | | |

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

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

c Any submission deadlines:

Page 11

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, show any relationship to Foundation Purpose of grant or Amount status of any foundation manager contribution Name and address (home or business) or substantial contributor recipient a Paid during the year ANCHOR BAPTIST CHURCH N/A PC GENERAL SUPPORT 3601 WINTHROP DRIVE LEXINGTON, KY 40514 1,000. BILL HARTACK CHARITABLE FOUNDATION N/A PC GENERAL SUPPORT 501 BASIN ST, SUITE A NEW ORLEANS, LA 70112 1,000. BLUEGRASS COMMUNITY FOUNDATION GET HEALTHY KENTUCKY N/A ÞС 200 EAST MAIN STREET FOOD PROGRAM LEXINGTON, KY 40507 10,000. BLUEGRASS CONSERVANCY N/A PC GENERAL SUPPORT 380 SOUTH MILL STREET, SUITE 205 LEXINGTON, KY 40508-2560 250. BMW ACADEMY N/A ÞС GENERAL SUPPORT 3016 BRACKTOWN RD LEXINGTON, KY 40511 10,000. CONTINUATION SHEET(S) SEE \triangleright 842,913. 3a b Approved for future payment NONE Total

Part XVI-A Analysis of Income-Producing Activities

| g arroamo arroso estivi titov iligivatou, | Unrelate | d business income | | ded by section 512, 513, or 514 | (e) |
|--|---------------|---------------------------------------|-------------------------------|---|--|
| Enter gross amounts unless otherwise indicated. 1 Program service revenue: | | (b) Amount | (C) Exclu- sion code | (d) Amount | Related or exempt function income |
| a | code | · · · | | | |
| b | | | 1 | | ······································ |
| c | 1 1 | | | | |
| d | | | | | |
| e | 1 1 | | | | |
| f | | | | | |
| g Fees and contracts from government agencies | | | | | |
| Membership dues and assessments | | | | | |
| Interest on savings and temporary cash | | · · · · · · · · · · · · · · · · · · · | | | |
| investments | | | 14 | 848. | |
| Dividends and interest from securities | | | 14 | 848. 66,680. | |
| Net rental income or (loss) from real estate: | | | | | ·- |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| Net rental income or (loss) from personal | | | | | |
| property | | | | | |
| Other investment income | | | | | |
| Gain or (loss) from sales of assets other | | | | | |
| than inventory | | | | | |
| Net income or (loss) from special events | | | L | | |
| Gross profit or (loss) from sales of inventory | | | | | |
| Other revenue: | | | 1 | | |
| a | | | 1 | | |
| b | | | | | |
| C | | | | | |
| d | | | | | |
| | | | | | |
| e | _ | _ | | | |
| eSubtotal. Add columns (b), (d), and (e) | | 0 | | 67,528. | 0 |
| e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) | | 0 | • | 67,528. 13 | 67,528 |
| eSubtotal. Add columns (b), (d), and (e) | S.) | 0 | • | | 67,528 |
| eSubtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 67,528 |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations Total Add line 12, columns (b), (d), and (e) We worksheet in line 13 instructions to verify calculations Total Add line 12, columns (b), (d), and (e) We worksheet in line 13 instructions to verify calculations Total Add line 12, columns (b), (d), and (e) | s to the Acco | mplishment of Ex | cempt | Purposes | 67,528 |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) the worksheet in line 13 instructions to verify calculations Tart XVI-B Relationship of Activitie ne No. Explain below how each activity for which | s to the Acco | mplishment of Ex | cempt A contrib | Purposes uted importantly to the accomp | 67,528 |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations Total Add line 12, columns (b), (d), and (e) We worksheet in line 13 instructions to verify calculations Total Add line 12, columns (b), (d), and (e) We worksheet in line 13 instructions to verify calculations Total Add line 12, columns (b), (d), and (e) | s to the Acco | mplishment of Ex | cempt A contrib | Purposes uted importantly to the accomp | 67,528 |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which | s to the Acco | mplishment of Ex | cempt A contrib | Purposes uted importantly to the accomp | 67,528 |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which | s to the Acco | mplishment of Ex | cempt | Purposes uted importantly to the accomp | 67,528 |
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| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations ART XVI-B Relationship of Activitie ne No. Explain below how each activity for which | s to the Acco | mplishment of Ex | cempt | Purposes uted importantly to the accomp | 67,528 |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations ART XVI-B Relationship of Activitie ne No. Explain below how each activity for which | s to the Acco | mplishment of Ex | cempt | Purposes uted importantly to the accomp | 67,528 |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations ART XVI-B Relationship of Activitie ne No. Explain below how each activity for which | s to the Acco | mplishment of Ex | cempt | Purposes uted importantly to the accomp | 67,528 |
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| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations ART XVI-B Relationship of Activitie ne No. Explain below how each activity for which | s to the Acco | mplishment of Ex | cempt | Purposes uted importantly to the accomp | 67,528 |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations ART XVI-B Relationship of Activitie ne No. Explain below how each activity for which | s to the Acco | mplishment of Ex | cempt | Purposes uted importantly to the accomp | 67,528 |
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| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations ART XVI-B Relationship of Activitie ne No. Explain below how each activity for which | s to the Acco | mplishment of Ex | cempt | Purposes uted importantly to the accomp | 67,528 |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which | s to the Acco | mplishment of Ex | cempt | Purposes uted importantly to the accomp | 67,528 |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which | s to the Acco | mplishment of Ex | cempt | Purposes uted importantly to the accomp | 67,528 |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which | s to the Acco | mplishment of Ex | cempt | Purposes uted importantly to the accomp | 67,528 |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which | s to the Acco | mplishment of Ex | cempt | Purposes uted importantly to the accomp | 67,528 |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which | s to the Acco | mplishment of Ex | cempt | Purposes uted importantly to the accomp | 67,528 |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) the worksheet in line 13 instructions to verify calculations Total Add line 12, columns (b), (d), and (e) the worksheet in line 13 instructions to verify calculations Total Add line 12, columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) | s to the Acco | mplishment of Ex | cempt | Purposes uted importantly to the accomp | 67,528 |

| 1 | 0 | 9 | 3 | 4 | 1 | 8 | Page | 1: | |
|---|---|---|---|---|---|---|------|----|--|
|---|---|---|---|---|---|---|------|----|--|

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash 1a(1) (2) Other assets X 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (a) Line no N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No Yes in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/AUnder penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge rue, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge return with the preparer shown below (see instr)? Sign Here DIRECTOR X Yes Print/Type preparer's name Preparer's signature Check [PTIN self- employed Paid VICTOR E. HARRIS P00025194 Preparer Firm's name ► WERLEIN & HARRIS, Firm's EIN $\triangleright 74-1907314$ Use Only Firm's address ► 3355 W. ALABAMA, SUITE 900 HOUSTON, TX 77098 713-961-5544 Form 990-PF (2013)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

2013

Name of the organization

THE MT. BRILLIANT FAMILY FOUNDATION (FORMERLY HGG FAMILY FOUNDATION)

Employer identification number

26-1093418

| Organization type (check one): | | | | | | | | |
|--------------------------------|---|---|--|--|--|--|--|--|
| Filers of | : | Section: | | | | | | |
| Form 99 | 0 or 990-EZ | 501(c)() (enter number) organization | | | | | | |
| | | 4947(a)(1) nonexempt charitable trust not treated as a private foundation | | | | | | |
| | | 527 political organization | | | | | | |
| Form 99 | 0-PF | X 501(c)(3) exempt private foundation | | | | | | |
| | | 4947(a)(1) nonexempt charitable trust treated as a private foundation | | | | | | |
| | | 501(c)(3) taxable private foundation | | | | | | |
| | | covered by the General Rule or a Special Rule. | | | | | | |
| | | 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. | | | | | | |
| General | Rule | | | | | | | |
| X | For an organization contributor. Comple | filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one ete Parts I and II. | | | | | | |
| Special | Rules | | | | | | | |
| | 509(a)(1) and 170(b |)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II | | | | | | |
| | For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. | | | | | | | |
| | For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to 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. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year | | | | | | | |
| | Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to | | | | | | | |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
THE MT. BRILLIANT FAMILY FOUNDATION
(FORMERLY HGG FAMILY FOUNDATION)

Employer identification number

| (FORM | ERLY HGG FAMILY FOUNDATION) | 26 | 5-1093418 |
|-------------------|---|----------------------------|--|
| Part I | Contributors (see instructions). Use duplicate copies of Part I if additional | al space is needed | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | HANNAH GOODMAN 3314 HUFFMAN MILL PIKE LEXINGTON, KY 40511 | \$ 400,000. | Person X Payroll |
| (a) <u>No.</u> | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 2 | MARY JANE GOODMAN 3314 HUFFMAN MILL PIKE LEXINGTON, KY 40511 | \$ 400,000. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) <u>No.</u> | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |

323452 10-24-13

Name of organization
THE MT. BRILLIANT FAMILY FOUNDATION
(FORMERLY HGG FAMILY FOUNDATION)

Employer identification number

26-1093418

| Part II | Noncash Property (see instructions). Use duplicate copies of Part II if ac | dditional space is needed. | |
|------------------------------|--|--|----------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |

| Name of orga | | | | Employer identification number | | | |
|-----------------|--|--|--|---|--|--|--|
| THE MT | BRILLIANT FAMILY FOUR | NDATION | | | | | |
| (FORME) | RLY HGG FAMILY FOUNDAT | ON) | 5. 78 | 26-1093418 | | | |
| Part III | Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the | idual contributions to section 501(c) he following line entry. For organizatio | (7), (8), or (10) organization Ins completing Part III, enter | is that total more than \$1,000 for the | | | |
| | year. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc. | c., contributions of \$1,000 or less for | the year. (Enter this information onc | e) ►\$ | | | |
| (a) No. | Use duplicate copies of Part III if additiona | al space is needed | | | | | |
| from | (b) Purpose of gift | (c) Use of gift | (d) Des | cription of how gift is held | | | |
| Part I | | | ······································ | | | | |
| | | | | | | | |
| —— I | | | | | | | |
| • | | | | ···· | | | |
| | · · · · · · · · · · · · · · · · · · · | (e) Transfer of gift | | | | | |
| | | (0, 7, 2, 1, | • | | | | |
| L | Transferee's name, address, ar | nd ZIP + 4 | Relationship of transferor to transferee | | | | |
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| 1. | | | | | | | |
| (a) No. | | | | | | | |
| from | (b) Purpose of gift | (c) Use of gift | (d) Des | cription of how gift is held | | | |
| Part I | | | | | | | |
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| | (e) Transfer of gift | | | | | | |
| | | | | | | | |
| L | Transferee's name, address, and ZIP + 4 Re | | | nsferor to transferee | | | |
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| (a) No. | | <u> </u> | | | | | |
| from Part I | (b) Purpose of gift | (c) Use of gift | (d) Des | cription of how gift is held | | | |
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| | (e) Transfer of gift | | | | | | |
| | Transferente nome address as | Daladia sahin ada | | | | | |
| - | Transferee's name, address, a | Id ZIF + 4 | Relationship of tra | nsferor to transferee | | | |
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| (a) No. from | (b) Purpose of gift | (c) Use of gift | (d) Dec | cription of how gift is held | | | |
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| | (e) Transfer of gift | | | | | | |
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| FORM 990-PF INTERES | ST ON SAVII | NGS AND TEM | PORARY | CASH IN | VESTMENTS | STATEMENT 1 | |
|-------------------------------------|---------------------------------------|------------------------------|-----------------------------|--------------------------|-------------------------------|-------------------------------|--|
| SOURCE | | REVE | (A) REVENUE PER BOOKS | | (B) VESTMENT COME | (C) ADJUSTED NET INCOME | |
| GOLDMAN SACHS TEXAS CAPITAL BANK | | 92. 756. | | 92. 756. | | | |
| TOTAL TO PART I, LII | NE 3 | | 848. | | 848. | | |
| FORM 990-PF | DIVIDENDS | S AND INTER | EST FRO | M SECUR | ITIES | STATEMENT 2 | |
| SOURCE | GROSS AMOUNT | CAPITAL GAINS DIVIDEND | ŔĔ | (A) EVENUE BOOKS | (B) NET INVES MENT INCO | | |
| GOLDMAN SACHS | 66,680 | • | 0. | 66,680. 66, | | 0. | |
| TO PART I, LINE 4 | 66,680 | • | 0. | 66,680. | 66,68 | 0. | |
| FORM 990-PF | | LEGAL | FEES | | | STATEMENT 3 | |
| DESCRIPTION | | (A) EXPENSES PER BOOKS | (E NET IN MENT I | WEST- | (C) ADJUSTED NET INCOM | | |
| LEGAL FEES | | 610. | | 0. | | 610. | |
| TO FM 990-PF, PG 1, | LN 16A = | 610. | | 0. | | 610. | |
| FORM 990-PF | · · · · · · · · · · · · · · · · · · · | A COOLINITATI | NO PERO | | | CON MENTAL A | |
| | | ACCOUNTI | NG FEES | • | | STATEMENT 4 | |
| DESCRIPTION | | (A) EXPENSES PER BOOKS | | 3) • IVEST- INCOME | (C) ADJUSTED NET INCOM | | |
| ACCOUNTING FEES | | 11,860. | | 6,523. | | 5,337. | |
| TO FORM 990-PF, PG | 1, LN 16B | 11,860. | | 6,523. | • | 5,337. | |
| | _ | · | · | | | | |

| FORM 990-PF O | THER PROFES | SIONAL FEES | STATEMENT 5 | | |
|---|------------------------------|-----------------------------------|-------------------------------|-------------------------------|--|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | |
| OTHER PROFESSIONAL FEES INVESTMENT FEES | 7,490. 2,203. | • | | 142. | |
| TO FORM 990-PF, PG 1, LN 16C | 9,693. | 9,551. | | 142. | |
| = | - 70 | | | | |
| FORM 990-PF | TAX | ES | S | гатемент 6 | |
| FORM 990-PF DESCRIPTION | (A) EXPENSES PER BOOKS | ES (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) | |
| | (A) EXPENSES | (B) NET INVEST- MENT INCOME | (C) ADJUSTED | (D) CHARITABLE | |

| FORM 990-PF | CORPORATE STOCK | | STATEMENT 7 |
|--------------------------------|-----------------|--------------------|---------------------------------------|
| DESCRIPTION | | BOOK VALUE | FAIR MARKET VALUE |
| ABBOTT LABS | | 26,430. | 36,414. |
| AIR PRODUCTS & CHEMICALS | | 12,432. | 16,767. |
| ALTRIA GROUP INC | | 35,000. | 57,585. |
| APPLE, INC. | | 67,506. | 126,230. |
| AUTOMATIC DATA PROCESSING | | 22,648. | 38,380. |
| BANK OF AMERICA | | 4,245. | 3,892. |
| BLACKROCK, INC. CMN | | 24,063. | 47,470. |
| CATERPILLAR, INC. | | 35,174. | 36,324. |
| CHEVRON | | 78,674. | 112,419. |
| COCA COLA | | 91,879. | 119,799. |
| CONOCO PHILLIPS | | 21,181. | 31,793. |
| DIAGEO PLC | | 22,701. | 26,484. |
| ESTEE LAUDER | | 34,732. | 52,724. |
| EXXON-MOBIL | | 98,566. | 141,680. |
| FRANKLIN RESOURCES | | 30,186. | 43,298. |
| FREEPORT MCMORAN COPPER | | 28,769. | 26,418. |
| INTEL CORP. | | 37,379. | 46,719. |
| INT'L BUSINESS MACHINES | | 55,504. | 65,649. |
| JOHNSON & JOHNSON | | 63,433. | 91,590. |
| JPMORGAN CHASE | | 38,916. | 58,480. |
| KINDER MORGAN HOLDCO | | 32,501. | 36,000. |
| KRAFT FOODS, INC. | | 16,318. | 23,343. |
| MCDONALDS | | 62,847. | 77,624. |
| MEDTRONIC INC. | | 7,062. | 11,478. |
| MERCK | | 21,154. | 32,532. |
| MONDELEZ | | 21,594. | 35,300. |
| NESTLE | | 51,675. | 73,424. |
| NOVO-NORODISK | | 20,131. | 46,190. |
| OCCIDENTAL PETROLEUM | | 56,821. | 66,570. |
| PEPSICO, INC. | | 41,813. | 49,764. |
| PHILIP MORRIS | | 82,283. | 130,695. |
| PHILLIPS66 | | 6,294. | 17,354. |
| PRAXAIR INC. | | 29,286. | • |
| PROCTOR & GAMBLE | | 56,420. | • |
| QUALCOMM INC. | | 19,852. | • |
| RIO TINTO PLC | | 19,148. | = |
| ROCHE HOLDING AG | | 32,896. | • |
| ROYAL DUTCH | | 57,338. | • |
| TARGET CORPORATION | | 33,574. | |
| TEXAS INSTRUMENTS INC. | | 22,349. | - |
| TIME WARNER CABLE CO. TOTAL SA | | 23,279. | - |
| UNITED TECHNOLOGIES | | 46,486. | - |
| WALGREEN CO. | | 38,489. | |
| WALMART | | 26,957. 34,041. | - |
| WALT DISNEY COMPANY | | 17,419. | - |
| ABBVIE INC. | | 25,530. | |
| COMCAST CORPORATION | | 24,590. | |
| ACE LIMITED | | 13,352. | |
| BRITISH SKY BROADCASTING GRO | IJP | 15,063. | · · · · · · · · · · · · · · · · · · · |
| CANADIAN PACIFIC RAILWAY LTD | | 28,788. | 37,830. |
| | | 20,,000 | 37,030. |

TOTAL TO FORM 990-PF, PART II, LINE 10B

1,814,768.

2,565,791.

| FORM 990-PF PART VIII - LIST TRUSTEES AND | RT VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS | | | |
|---|---|----------|---------------------------------|----|
| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | | EMPLOYEE BEN PLAN CONTRIB | |
| HANNAH JANE GOODMAN 3314 HUFFMAN MILL PIKE LEXINGTON, KY 40511 | DIRECTOR 1.00 | 0. | 0. | 0. |
| HAROLD G. GOODMAN 3314 HUFFMAN MILL PIKE LEXINGTON, KY 40511 | DIRECTOR 1.00 | 0. | 0. | 0. |
| HUTTON GREGORY GOODMAN 3314 HUFFMAN MILL PIKE LEXINGTON, KY 40511 | CHAIRMAN, DIRE 1.00 | CTOR 0. | 0. | 0. |
| REBECCA GOODMAN 3314 HUFFMAN MILL PIKE LEXINGTON, KY 40511 | TREASURER, DIR | ECTOR 0. | 0. | 0. |
| MARY JANE GOODMAN 3314 HUFFMAN MILL PIKE LEXINGTON, KY 40511 | DIRECTOR 1.00 | 0. | 0. | 0. |
| H. VITERBO GOODMAN 3314 HUFFMAN MILL PIKE LEXINGTON, KY 40511 | DIRECTOR 1.00 | 0. | 0. | 0. |
| GAY BREDIN 3314 HUFFMAN MILL PIKE LEXINGTON, KY 40511 | SECRETARY 1.00 | 0. | 0. | 0. |
| TOTALS INCLUDED ON 990-PF, PAGE 6 | , PART VIII | 0. | 0. | 0. |

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of contribution Amount any foundation manager Name and address (home or business) recipient or substantial contributor CAMP HORSIN' AROUND N/A ÞС GENERAL SUPPORT P.O. BOX 22276 LEXINGTON, KY 40522 10,000. CLEVELAND CLINIC N/A PC RICHARD J. FASENMYER 3050 SCIENCE PARK DRIVE, AC 322 EDUCATION & RESEARCH BEECHWOOD, OH 44122 FUND 50,000. N/A FAYETTE COUNTY PUBLIC SCHOOLS ΡC SUPERIOR CUSTOMER 701 EAST MAIN ST SERVICE/COMMUNITY LEXINGTON, KY 40502 RELATIONS DEPARTMENT 11,500. KENTUCKY DRESSAGE ASSOCIATION N/A PC MARY KEARNEY CANCER 5K 13010 MIDDLETOWN ROAD FUN WALK LOUISVILLE, KY 40223 5,000. KENTUCKY HORSE PARK FOUNDATION N/A GENERAL SUPPORT/BATTLE ÞС 4089 IRON WORKS PARKWAY IN THE SADDLE CALCUTTA LEXINGTON, KY 40511-8400 78,500. MARKEY CANCER FOUNDATION N/A ÞС GENERAL SUPPORT 800 ROSS STREET, CC160 LEXINGTON, KY 40536-0093 20,420. MD ANDERSON CANCER CENTER N/A ÞС CANCER RESEARCH AND 1515 HOLCOMBE BLVD CLL RESEARCH FUND HOUSTON, TX 77030 50,000. NATIONAL MULTIPLE SCLEROSIS SOCIETY N/A ÞС GENERAL SUPPORT 733 THIRD AVENUE NEW YORK, NY 10017 1,000. POINT CLEAR CHARITIES, INC N/A ÞС GENERAL SUPPORT 7670 DAIRY ROAD FAIRHOPE, AL 36532 10,000. SAYRE SCHOOL N/A PC GENERAL SUPPORT/DEBT 194 NORTH LIMESTONE STREET REDUCTION/WHITE FAMILY LEXINGTON, KY 40507 SCHOLARS 150,083. Total from continuation sheets 820,663.

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager or substantial contributor Name and address (home or business) recipient SOUTHERN ARIZONA RESCUE ASSOCIATION N/A ÞС GENERAL SUPPORT P.O. BOX 12892 TUCSON, AZ 85732-2892 2,500. TEXAS EXES ANNUAL GIVING CLUB N/A ÞС GENERAL SUPPORT P.O BOX 142522 AUSTIN, TX 78714-9703 160. N/A THE CHURCH OF ST. JOHN THE DIVINE ÞС GENERAL SUPPORT 2450 RIVER OAKS BOULEVARD HOUSTON, TX 77019 10,000. THE INDEPENDENCE FUND GENERAL SUPPORT N/A ÞС 32379 COLLECTION CENTER DRIVE CHICAGO, IL 60693-0323 25,000. THE RACE FOR EDUCATION N/A ₽C MARY JANE WHITE 1818 VERSAILLES ROAD SCHOLARSHIP/BACHELOR LEXINGTON, KY 40504 AUCTION 12,500. N/A PC THE UNIVERSITY OF TEXAS AT AUSTIN TO SUPPORT P.O. BOX 13178 INTERCOLLEGIATE AUSTIN, TX 78711-3178 ATHLETICS 14,000. TRANSYLVANIA UNIVERSITY N/A ÞС GENERAL SUPPORT/ART 300 N. BROADWAY DEPARTMENT LEXINGTON, KY 40508 20,000. UNIVERSITY OF KENTUCKY N/A PC ENDOWED CHAIR - TRAUMA WILLIAM B STURGILL DEVELOPMENT SURGERY FUND BUILDING LEXINGTON, KY 40506-0015 300,000. N/A ÞС VANDERBILT UNIVERSITY GOODMAN FAMILY MEDICAL 2301 VANDERBILT PLACE FUND NASHVILLE, TN 37240-7727 50,000. Total from continuation sheets

| Form 8 | 3868 (Rev. 1-2014) | | | | | Page 2 | |
|--|--|-------------------|--|--------------|-----------------|--------------------|--|
| _ | ou are filing for an Additional (Not Automatic) 3-Month Ext | ension, c | omplete only Part II and check this | box | | ► X | |
| - | Only complete Part II if you have already been granted an air | | - | • | 868 | | |
| | ou are filing for an Automatic 3-Month Extension, complete | | | | | | |
| Part | | | | al (no co | pies nee | ded). | |
| | | | | | | see instructions | |
| Туре | or Name of exempt organization or other filer, see instruc | ctions | | | | on number (EIN) or | |
| print THE MT. BRILLIANT FAMILY FOUNDATION | | | | | | | |
| File by th | PODMEDLY HOO EANTLY EOIDIDAGTON | | | | | 93418 | |
| due date | Number street and room or suite no. If a P.O. box, see instructions | | | | curity numb | per (SSN) | |
| filing you return S | " DOIA TITIEDWANT METT DEVE | | İ | | • | , , , , | |
| instruction | City, town or post office, state, and ZIP code. For a fo | reign addi | ress, see instructions. | | - . | | |
| | LEXINGTON, KY 40511 | _ | | | | | |
| | | | | | | | |
| Enter 1 | the Return code for the return that this application is for (file | a separat | e application for each return) | | | 0 4 | |
| | ., | • | | • | | | |
| Applic | cation | Return | Application | _ | | Return | |
| Is For | | Code | Is For | | | Code | |
| Form | 990 or Form 990-EZ | 01 | _ | | | | |
| Form 9 | 990-BL | 02 | Form 1041-A | | | 08 | |
| Form 4 | 4720 (ındıvıdual) | 03 | Form 4720 (other than individual) | | | 09 | |
| Form 9 | 990-PF | 04 | Form 5227 | | | 10 | |
| Form ! | 990-T (sec. 401(a) or 408(a) trust) | 05 | Form 6069 | 1 | | | |
| Form 9 | 990-T (trust other than above) | 06 | Form 8870 | | | 12 | |
| STOP | ! Do not complete Part II if you were not already granted | | | ously filed | Form <u>886</u> | 8. | |
| | THE MT. BRILLIA | NT F | MILY FDTN | | | | |
| | e books are in the care of \blacktriangleright 3314 HUFFMAN M1 | [LL P] | <u> KE - LEXINGTON, KY</u> | 4051 | 1 | | |
| Tel | ephone No. ► 859-293-1991 | | Fax No. ▶ | | | | |
| If the state of the sta | he organization does not have an office or place of business | in the Un | ited States, check this box | | | ▶ □ | |
| If the state of the sta | his is for a Group Return, enter the organization's four digit (| Group Exe | mption Number (GEN) f | f this is fo | r the whole | group, check this | |
| box | | | ach a list with the names and EINs of | all memb | ers the exte | nsion is for. | |
| | · · · · · · · · · · · · · · · · · · · | NOVEM | BER 15, 2014 | | | | |
| | For calendar year 2013 , or other tax year beginning $$ | | , and ending | <u>g</u> | | <u></u> . | |
| 6 | If the tax year entered in line 5 is for less than 12 months, cl | heck reaso | on Initial return | Fınal r | eturn | | |
| | Change in accounting period | | | | | | |
| | State in detail why you need the extension | | | | | | |
| | THE FOUNDATION IS AWAITING ADD | | | RMAT'I | ON THA | TT WILL | |
| | NOT BE AVAILABLE UNTIL SEPTEMB | EK 15 | , 2014. | | | | |
| | | | ····· | | | | |
| | If this application is for Forms 990-BL, 990-PF, 990-T, 4720, | or 6069, | enter the tentative tax, less any | \ | | 070 | |
| | nonrefundable credits. See instructions. | | | 8a | \$ | 979. | |
| | If this application is for Forms 990-PF, 990-T, 4720, or 6069 | _ | | ļ | | | |
| | tax payments made. Include any prior year overpayment alle | owed as a | credit and any amount paid | | | 070 | |
| _ | previously with Form 8868. | | | 8b | \$ | 979. | |
| | Balance due. Subtract line 8b from line 8a. Include your pa | _ | h this form, if required, by using | 1 _ | | 0 | |
| | EFTPS (Electronic Federal Tax Payment System). See instru | | et he completed for Port II o | 8c | \$ | 0. | |
| 11==== | _ | | st be completed for Part II of | - | | an and habit | |
| unaer It is tri | penalties of perjury, I declare that I have examined this form, includ ie, correct, and complete, and that I am authorized to prepare this fo | my accomp orm. | variying scriedules and statements, and to | ine dest of | iny knowled | ge and belief, | |
| | | | | Data | | | |
| Signat | ure Title | CEM | | Date | | 9969 (Pov. 1.2014) | |

Form **8868** (Rev. 1-2014)