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Form

990-PF	or: ▶ Do not ent	Return of Private Foundation Section 4947(a)(1) Trust Treated as Private Foundation er Social Security numbers on this form as it may be made public. Form 990-PF and its separate instructions is at www.irs.gov/form990pf	2013
Revenue Service	r tax year beginning	and ending	Open to Public Inspection
ne of foundation	,, <u>,</u>	A Employer identificatio	n number

Na	me of foundation			A Employer identification	n number
	IT ADV DOONE BOINDAMION T	NC		61-1249175	
_	ILLARY BOONE FOUNDATION, I	Room/suite		·	
	376 SOUTH BROADWAY	audi ess)	71001123ditt	B Telephone number (859) 259 – 9	600
	y or town, state or province, country, and ZIP or foreign po	netal code	L	C If exemption application is p	
	zexington, Ky 40508	ustal code		if exemption application is p	sending, check here
_	Check all that apply Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	s, check here
u	Final return	X Amended return			
	Address change	Name change		Foreign organizations me check here and attach co	eeting the 85% test, pmputation
H	Check type of organization: X Section 501(c)(3) ex			E If private foundation sta	
Ï	· · · , · · · · · · · · · · · · · · · ·	Other taxable private founda	tion	under section 507(b)(1)	
Ī F		ng method: X Cash	Accrual	F If the foundation is in a	60-month termination
	rom Part II. col. (c), line 16)	her (specify)		under section 507(b)(1)	
•	\$ 16,211,697. (Part I, colui	mn (d) must be on cash b	oasis.)		
P	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
	necessarily equal the amounts in column (a))	expenses per books	ıncome	income	(cash basis only)
	1 Contributions, gifts, grants, etc., received	8,926,691.		N/A	
	2 Check I if the foundation is not required to attach Sch. 8				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	90,500.	90,500.		STATEMENT 1
	5a Gross rents				
	Net rental income or (loss)	004 100			
ā	68 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 1 605 031	204,188.		- · ·	
ent	b Gross sales price for all 1,695,931.		204 100		
Revenue	7 Capital gain net income (from Part IV, line 2)		204,188.		
_	8 Net Short-term capital gain		 		
	9 Income modifications Gross sales less returns				
	10a and allowances				
	b Less Cost of goods sold c Gross profit or (loss)			ļ	
	11 Other income				
	12 Total Add lines 1 through 11	9,221,379.	294,688.		
	13 Compensation of officers, directors, trustees, etc	0.	0.		0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
enses	16a Legal fees				
ë	b Accounting fees STMT 2	3,460.	1,730.		1,730.
Ä	c Other professional fees				
Ke	17 Interest				
I ¥ 2016 and Administrative Exp	18 Taxes STMT 3	17.	2].	RECEIVE	0.
	19 Depreciation and depletion				<u> </u>
2016 dminist	20 Occupancy			\$	
∌ §	21 Travel, conferences, and meetings			JAN 08 201	, ,
→	22 Printing and publications	36,046.	36,005.		41.
Operating	23 Other expenses STMT 4	30,040.	30,003.	OGDEN. L	41.
J/ erat	24 Total operating and administrative	39,523.	37,737.		1 771.
SCANNED JAN I 99	expenses Add lines 13 through 23 25 Contributions, gifts, grants paid	226,500.	37,737.		1,771. 226,500.
불	26 Total expenses and disbursements	220,300.			220,3000
3	Add lines 24 and 25	266,023.	37,737.		228,271.
<u>3</u> —	27 Subtract line 26 from line 12:		2.7.270		,
奶	Excess of revenue over expenses and disbursements	8,955,356.			
	b Net investment income (if negative, enter -0-)		256,951.		
	c Adjusted net income (if negative, enter -0-)			N/A	

323501 10-10-13 LHA For Paperwork Reduction Act Notice, see instructions.

AS AMENDED

For	m 99	60-PF(2013) HILARY BOONE FOUNDATION	, INC.	61-	1249175 Page 2	
• 🕝	Dort II I Dalance Sheets Automobility and through it in document		Beginning of year	End of year		
<u></u>	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash - non-interest-bearing	609,691.	423,253.	423,253.	
	2	Savings and temporary cash investments		7,554,341.	7,554,341.	
	3	Accounts receivable ►				
		Less: allowance for doubtful accounts ▶		to to the comment		
	4	Pledges receivable ▶				
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
	_	Receivables due from officers, directors, trustees, and other				
	ľ	disqualified persons				
	7	Other notes and loans receivable				
	l <i>'</i>	Less: allowance for doubtful accounts				
, 0	١.	Inventories for sale or use				
Assets	l	Prepaid expenses and deferred charges			_	
As	ı	Investments - U.S. and state government obligations				
	l	n Investments - corporate stock STMT 6	4,561,364.	6,143,857.	8,232,103.	
	l	<u> </u>	4,301,304.	0,143,037.	0,232,103.	
	١	Investments - corporate bonds				
	' '	Investments - land, buildings, and equipment basis				
	١.,	Less accumulated depreciation				
	l	Investments - mortgage loans				
	i	Investments - other			,	
	14	Land, buildings, and equipment: basis				
		Less accumulated depreciation		0.000	2 222	
	ł	Other assets (describe STATEMENT 7)	0.	2,000.	2,000.	
	16	Total assets (to be completed by all filers - see the	E 181 055	14 100 451	16 011 605	
_	<u> </u>	instructions. Also, see page 1, item 1)	5,171,055.	14,123,451.	16,211,697.	
		Accounts payable and accrued expenses	2,960.			
	18					
es	19	Deferred revenue				
Liabilities	20	, , , , , , , , , , , , , , , , , , , ,				
iab	21	Mortgages and other notes payable				
_	22	Other liabilities (describe)				
				_		
_	23	Total liabilities (add lines 17 through 22)	2,960.	0.		
		Foundations that follow SFAS 117, check here				
s		and complete lines 24 through 26 and lines 30 and 31.				
ည	24	Unrestricted				
alar	25	Temporarily restricted				
8	26	L				
Š		Foundations that do not follow SFAS 117, check here				
or Fund Balances		and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds	0.	0.		
se	28	Paid-in or capital surplus, or land, bldg., and equipment fund	986,679.	986,679.		
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	4,181,416.	13,136,772.		
Š	30	Total net assets or fund balances	5,168,095.	14,123,451.		
_	31	Total liabilities and net assets/fund balances	5,171,055	14,123,451.		
P	art	Analysis of Changes in Net Assets or Fund Ba	alances			
		I net assets or fund balances at beginning of year - Part II, column (a), line 3	ou .		E 160 005	
		st agree with end-of-year figure reported on prior year's return) r amount from Part I, line 27a			5,168,095.	
				2	8,955,356.	
		r increases not included in line 2 (itemize)		3	0. 14,123,451.	
		eases not included in line 2 (itemize)		4	14,123,451.	
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	lumn (b), line 30	5	14,123,451.	

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AS AMENDED

	990-PF(2013) HILARY BOONE FOUNDATION, INC.	61-	1249	175		Page 4
Pa	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948	- see ir	ıstrı	ıctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)]			1
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%	1	L		5,1	39.
	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).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3			5,1	<u>39.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			5,1	<u>39.</u>
6	Credits/Payments: **PLEASE SEE ATTACHED FOOTNOTE					
а	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 1,765.	}				
b	Exempt foreign organizations - tax withheld at source 6b]				ĺ
C	Tax paid with application for extension of time to file (Form 8868) 6c 3,350.	}				
d	Backup withholding erroneously withheld 6d]
7	Total credits and payments. Add lines 6a through 6d	7			5,1	15.
8	Enter any penalty for underpayment of estimated tax. Check here $\overline{f X}$ if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed SEE STATEMENT 8	9				24.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be; Credited to 2014 estimated tax ▶ Refunded ▶	11				
Pa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	เก			Yes	
	any political campaign?		L	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		X
	If the answer is "Yes" to $_{1a}$ or $_{1b}$, attach a detailed description of the activities and copies of any materials publish	ed or				
	distributed by the foundation in connection with the activities					
C	Did the foundation file Form 1120-POL for this year?		L	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. \blacktriangleright \$ (2) On foundation managers. \blacktriangleright \$ 0 .		l			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		L	2		X
	If "Yes," attach a detailed description of the activities.			ĺ		
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, of	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		L	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A [4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		Ļ	5		X
	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					i
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state 	law				
	remain in the governing instrument?		-	6	X	
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	
_						
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	KY					
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		_		-,,_	
	of each state as required by General Instruction G? If "No," attach explanation		1	8b	Х	
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar				172
	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV	m	, ,	9	<u></u>	<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	TMT	9	10	X	

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compa	ensation
NONE		
Total number of others receiving over \$50,000 for professional services	>	0
Part: X:At 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 N/A	+	
	1	
	-	
2	†	
5 <u></u>	1	
	7	
3	1	
	1	
	7	
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount	
1 <u>N/A</u>	_	
	_	_
		0.
2	_	
	_	
		
All other program-related investments. See instructions.		
3	4	
	4	
	 	
Total. Add lines 1 through 3		0.
	Form 990-P l	F (2013)

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	Γ Τ	· · · · · · · · · · · · · · · · · · ·
a	Average monthly fair market value of securities	ia l	6.471.567.
	Average of monthly cash balances	1b	6,471,567. 2,818,978.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	9,290,545.
	Reduction claimed for blockage or other factors reported on lines 1a and	1.0	.,,
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	9,290,545.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	139,358.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	9,151,187.
6	Minimum investment return. Enter 5% of line 5	6	457,559.
P	art,XI; Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	457,559.
2a		12 14 V	
b		200 E.A. (1794) (279)	
C		2c	5,139.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	452,420.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	452,420.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	452,420.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	100 154	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	228,271.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	- 15	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	228,271.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		-
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	228,271.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for	the section
	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,		·		
line 7				452,420.
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only			225,564.	
b Total for prior years;				
	<u>, </u>	0.		
3 Excess distributions carryover, if any, to 2013:				
a From 2008				
b From 2009				
c From 2010				
dFrom 2011				
eFrom 2012				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2013 from Part XII, line 4: ►\$ 228, 271.				
			225,564.	
a Applied to 2012, but not more than line 2a b Applied to undistributed income of prior			223,304.	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2013 distributable amount				2,707.
e Remaining amount distributed out of corpus	0.			27,0,0
5 Excess distributions carryover applied to 2013	0.			0.
(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:	0.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract	0.			-
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2012 Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2013. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2014				449,713.
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	0.			, -
9 Excess distributions carryover to 2014.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				}
a Excess from 2009 b Excess from 2010	1			
c Excess from 2011	{			
dExcess from 2012				
e Excess from 2013				

HILARY BOONE FOUNDATION, INC.

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Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient a Paid during the year ACHIEVEMENT CENTER OF DELRAY N/A PUBLIC SUBSIDY 555 NW 4TH STREET DELRAY BEACH, FL 33444 700. ADVENTURE SCIENCE CENTER N/A PUBLIC SUBSIDY 800 FORT NEGLEY BOULEVARD NASHVILLE, TN 37203 5,000. AVIATION MUSEUM N/A PUBLIC SUBSIDY 4029 AIRPORT ROAD 1,000. LEXINGTON, KY 40510 BABY HEALTH SERVICES N/A PUBLIC SUBSIDY 1590 HARRODSBURG RD 500. LEXINGTON, KY 40504 BLUEGRASS FARMS CHARITIES N/A PUBLIC SUBSIDY 340 LEGION DR LEXINGTON, KY 40504 2,500. SEE CONTINUATION SHEET(S) ➤ 3a 226,500. Total b Approved for future payment NONE Total **▶** 3b 0.

323621 10-10-13

Dart YVI-A	Analysis of Income-Producing Activities	•
IUILATIA	Analysis of moonie-i roudoing Activities	•

-,					
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	Tunction income
a	. 		 		
b	.	<u> </u>			
<u> </u>	·				_
d	.				
e	.				
f	.				
g Fees and contracts from government agencies	ļ				
2 Membership dues and assessments					
3 Interest on savings and temporary cash]				
investments	<u> </u>		1 1	00.500	
4 Dividends and interest from securities	ļ		14	90,500.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property			 		
6 Net rental income or (loss) from personal					
property			+		
7 Other investment income					
8 Gain or (loss) from sales of assets other			1 1 0	204 100	
than inventory			18	204,188.	
9 Net income or (loss) from special events			+		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a	·		 		
b	.	 			
<u> </u>	· -		+ +		
<u> </u>	·		+ +		
40 Cubtotal Add columns (b) (d) and (a)	-	0		294,688.	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>		• 1	13	294,688.
(See worksheet in line 13 instructions to verify calculations.)				13	234,000.
					
Part XVI-B Relationship of Activities	to the Acco	mplishment of E	xempt F	Purposes	
Line No Explain below how each activity for which income	nme is renorted in	column (e) of Part XVI-	Δ contribute	d importantly to the accomo	ulshment of
the foundation's exempt purposes (other than			A continue	a importantly to the accomp	mannent of
	, , ,			· ····································	
		.			
· · · · · · · · · · · · · · · · · · ·					
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	_				

		Y BOONE FO				61-124			age 13
Part 2	Information Research		fers To a	nd Transactions	and Relations	ships With Nonch	aritabl	е	
	the organization directly or indi	rectly engage in any of		_		tion 501(c) of	-	Yes	No
	Code (other than section 501(c				nizations?				
	nsfers from the reporting found Cash	ation to a noncharitable	e exempt org	anization of:			1a(1)		х
	Other assets						1a(2)		X
	er transactions:						14(2)	'	 ^
	Sales of assets to a noncharita	ible exempt organizatio	n				1b(1)		X
	Purchases of assets from a no						1b(2)	_	X
(3)	Rental of facilities, equipment,	or other assets					1b(3)		X
(4)	Reimbursement arrangements	;					1b(4)		X
	Loans or loan guarantees						1b(5)	-	X
	Performance of services or me	•	-				1b(6)	ļ	X
	aring of facilities, equipment, ma			=	lucius aba aba da		10	<u> </u>	X
	ne answer to any of the above is services given by the reporting f							sets,	
	umn (d) the value of the goods,			u 1655 tilali iali illalket val	ue in any transactio	ii or sharing arrangement,	SHOW III		
(a)Line no				exempt organization	(d) Description	on of transfers, transactions, and	sharing a	rrangeme	ents
			N/A			·			
		-							
									
	1		<u> </u>						
ın s	he foundation directly or indirectled in the code (other section 501(c) of the Code (other section) scheduling sch	er than section 501(c)(3		· · ·	izations described	[Yes	X] No
	(a) Name of or			(b) Type of organization		(c) Description of relations	ship		
	N/A								
	Under genalties of payury, Leeclade	the Albaye A amused this	rotura uncludino	accompanying schedules and	l statemente, and to the	a heat of my knowledge			
Sign Here	and belief, it is true correct, and co	ppiete Oscilatation of over	parer (other than	accompanying schedules and taxpayer) if basad on the information	PRESI URER	ĎĔŇŤŸŤŔĔAS	turn with the own below	e prepar (see ins	er
	Signature of officer or truster		0	Date	Title	Charle 1 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			
	Print/Type preparer's n	arne	Preparer's sig	gnature A)	Date	Check if PTIN self- employed			
Paid	DOUGLAS DE	an	Howay	lear Jean	12/28/15	· · ·	0167	070	
Prepa			LEND	FORD, PLLC		Firm's EIN ▶ 27 – 3			

Phone no. (859)255-2341

Use Only

Firm's address ▶ 106 W. VINE STREET, SUITE 600

LEXINGTON, KY 40507

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient BLUEGRASS TOMORROW N/A PUBLIC SUBSIDY 2526 REGENCY POINT PATH LEXINGTON, KY 40503 2,000. N/A PUBLIC SUBSIDY CARDINAL HILL REHABILITATION HOSPITAL 2050 VERSAILLES RD LEXINGTON, KY 40504 5,000. CHARITABLE GOLF FOUNDATION N/A PUBLIC SUBSIDY 2331 DANBURY LANE FORT MITCHEL, KY 41017 6,000. CHRIST CHURCH CATHEDRAL N/A PUBLIC SUBSIDY 166 MARKET STREET LEXINGTON, KY 40507 1,000. CHRYSALIS HOUSE N/A PUBLIC SUBSIDY 120 CHRYSALIS CT LEXINGTON, KY 40508 2,000. CLAY COMMUNITY CENTER N/A PUBLIC SUBSIDY 3400 INDIAN MOUND DR MT. STERLING, KY 40353 500. COMMUNITY FOUNDATION FOR PALM BEACH N/A PUBLIC SUBSIDY AND MARTIN COUNTIES 700 SOUTH DIXIE HIGHWAY, STE 200 WEST PALM BEACH , FL 33401 3,000. FAYETTE COUNTY ATTORNEY DRIVER N/A PUBLIC SUBSIDY EDUCATION INC 110 WEST VINE STREET 5TH FL 210 LEXINGTON, KY 40507 1,000. FUND FOR EXCELLENCE - KET N/A PUBLIC SUBSIDY 600 COOPER DRIVE LEXINGTON, KY 40502 5,000. GATEWAY REGIONAL ARTS CENTER N/A PUBLIC SUBSIDY 101 E MAIN ST MT. STERLING, KY 40353 500. 216,800. Total from continuation sheets

Part 'XV

Part 'XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient GEORGE WASHINGTON FOUNDATION N/A PUBLIC SUBSIDY 1201 WASHINGTON AVENUE FREDERICKSBURG, VA 22405 1,000. SUBSIDY HENRY CLAY CENTER STATESMANSHIP N/A PUBLIC 176 NORTH MILL STREET LEXINGTON, KY 40507 10,000. HOLLINS UNIVERSITY N/A PUBLIC SUBSIDY 7916 WILLIAMSON ROAD ROANOKE, VA 24109 2,000. HORSE FARM WORKERS EDUCATIONAL N/A PUBLIC SUBSIDY ASSISTANCE FUND 2938 FOUR PINES DRIVE LEXINGTON, KY 40502 5,000. HOSPICE OF THE BLUEGRASS N/A PUBLIC SUBSIDY 2312 ALEXANDRIA DR LEXINGTON, KY 40504 5,000. HOUND WELFARE FUND N/A PUBLIC SUBSIDY P.O. BOX 55610 LEXINGTON, KY 40555 10,000. JUBILEE JOBS OF LEXINGTON N/A PUBLIC SUBSIDY 1450 NORTH BROADWAY LEXINGTON, KY 40505 2,000. JUNIOR ACHIEVEMENT OF THE BLUEGRASS N/A PUBLIC SUBSIDY 1092 DUVAL STREET STE 240 LEXINGTON, KY 40515 1,000. JUVENILE DIABETES RESEARCH FOUNDATION PUBLIC SUBSIDY N/A 26 BROADWAY NEW YORK, NY 10004 1,000. KENTUCKY CHILDRENS HOSPITAL N/A SUBSIDY PUBLIC 800 ROSE STREET LEXINGTON, KY 40536 7,300. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient KENTUCKY CONSERVATORY THEATRE N/A PUBLIC SUBSIDY PO BOX 864 LEXINGTON, KY 40588 9,000. LEXARTS PUBLIC N/A SUBSIDY 161 NORTH MILL STREET LEXINGTON, KY 40507 1,000. LEXINGTON HUMANE SOCIETY N/A PUBLIC SUBSIDY 1600 OLD FRANKFORT PIKE LEXINGTON, KY 40504 1,000. LEXINGTON PHILHARMONIC SUBSIDY N/A PUBLIC 161 NORTH MILL STREET LEXINGTON, KY 40507 10,000. RIDING FOR HOPE N/A PUBLIC SUBSIDY P.O. BOX 13155 LEXINGTON, KY 40511 2,000. SALVATION ARMY N/A PUBLIC SUBSIDY 228 EAST NEW CIRCLE ROAD LEXINGTON, KY 40505 1,000. SOCIETY OF THE FOUR ARTS N/A PUBLIC SUBSIDY 2 4 ARTS PLAZA PALM BEACH , FL 33480 1,000. ST. CATHERINE COLLEGE N/A PUBLIC SUBSIDY 2735 BARDSTOWN RD SPRINGFIELD, KY 40069 1,000. ST. PAUL'S EPISCOPAL FOR THE BENEFIT N/A PUBLIC SUBSIDY PAUL'S PLACE 188 SOUTH SWINTON AVENUE DELRAY BEACH, FL 33444 500. STRATFORD HALL N/A PUBLIC SUBSIDY 483 GREAT HOUSE RD STRATFORD, VA 22558 5,000. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient SUBSIDY THE BLUE GRASS TRUST PUBLIC N/A 253 MARKET STREET LEXINGTON, KY 40507 6,000. SUBSIDY THE COLONIAL WILLIAMSBURG FOUNDATION N/A PUBLIC P.O. BOX 1776 WILLIAMSBURG, VA 23187 1,000. THE HOPE CENTER N/A PUBLIC SUBSIDY 360 W LOUDON AVE LEXINGTON, KY 40508 1,000. THE LEXINGTON CANCER FOUNDATION N/A PUBLIC SUBSIDY 1504 COLLEGE WAY LEXINGTON, KY 40502 5,000. SUBSIDY THE LEXINGTON SCHOOL N/A PUBLIC 1050 LANE ALLEN RD LEXINGTON, KY 40504 5,000. SUBSIDY THE SPEED MUSEUM N/A PUBLIC 2035 SOUTH THIRD STREET LOUISVILLE, KY 40208 10,000. SUBSIDY PUBLIC THE TAFT SCHOOL N/A 110 WOODBURY RD WATERTOWN, CT 06795 5,000. PUBLIC SUBSIDY THE WARWICK FOUNDATION N/A PO BOX 1183 LEXINGTON, KY 40588 1,000. UNITED STATES EQUESTRIAN TEAM N/A PUBLIC SUBSIDY FOUNDATION PO BOX 355 GLADSTONE, NJ 07394 1,000. UNIVERSITY OF KENTUCKY N/A PUBLIC SUBSIDY 410 ADMINISTRATION DRIVE LEXINGTON, KY 40506 15,000. Total from continuation sheets

Part XV Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient VANDERBILT SCHOOL OF ENGINEERING N/A PUBLIC SUBSIDY 2301 VANDERBILT PLACE PMB 351826 NASHVILLE, TN 37235 55,000. WALNUT HILL CHURCH N/A PUBLIC SUBSIDY 575 WALNUT HILL RD LEXINGTON, KY 40515 5,000. WINTERTHUR PUBLIC SUBSIDY N/A 5101 KENNET PIKE WINTERTHUR, DE 19735 5,000. Total from continuation sheets

AS AMENDED

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

Name of the organization)N	Employer identification number						
	HILARY BOONE FOUNDATION, INC.	61-1249175						
Organization type (check	cone):							
Filers of:	Section:							
Form 990 or 990-EZ								
	4947(a)(1) nonexempt charitable trust not treated as a private foundation							
	527 political organization							
Form 990-PF	X 501(c)(3) exempt private foundation	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
Note. Only a section 501 General Rule X For an organizat	n is covered by the General Rule or a Special Rule. (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule, or (10) organization can check boxes for both the General Rule and a Special Rule, or (10) organization can check boxes for both the General Rule and a Special Rule, (10) or							
Special Rules								
509(a)(1) and 17	01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of th 70(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of in (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II							
total contributio	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one one of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, of cruelty to children or animals. Complete Parts I, II, and III							
contributions fo If this box is che purpose. Do not	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 lf 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							
=	n that is not covered by the General Rule and/or the Special Rules does not file Scheo							

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 org	ganization	Emp	loyer identification number
HILAR	Y BOONE FOUNDATION, INC.		51-1249175
Part I	Contributors (see instructions) Use duplicate copies of Part I	ıf addıtıonal space ıs needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ESTATE OF HILARY BOONE 376 SOUTH BROADWAY LEXINGTON, KY 40508	\$\$\$\$,926,691.	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(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 Oncash Complete Part II for noncash contributions.)
(a) No.	(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)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
323452 10-2-	A.13	\$Schedule B (Fo	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of or	ganization		Employ	er identification number	
HILAR	Y BOONE FOUNDATION, INC.		61	-1249175	
Part II	Noncash Property (see instructions) Use duplicate copies of Part II if a	dditional space is neede	d		
(a) No. from Part I	Description of noncash property diven		(c) FMV (or estimate) (see instructions)		
1	7,000 SHS HUMANA, INC. AND 7,000 SHS BERKSHIRE HATHAWAY INC.	\$1,373,575.		05/31/13	
(a) No. from Part I	(b) Description of noncash property given	i Fivivior estimatei		(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	
		\$			

FORM 990-PF	DIVIDENDS	AND INTER	EST FROM SECUR	ITIES ST	CATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE S PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
GOLDMAN SACHS JP MORGAN JP MORGAN AGENCY	1,225. 21,195.		0. 1,225. 0. 21,195.		
ACCT POWERSHARES DB	107,926.	39,890	6. 68,030.	68,030.	
COMMODITY INDEX TRACKING FUND	50.	, (0. 50.	50.	
TO PART I, LINE 4	130,396.	39,890	90,500.	90,500.	
FORM 990-PF	-	ACCOUNTI	NG FEES	Si	FATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES		3,460.	1,730.		1,730.
TO FORM 990-PF, PG	1, LN 16B	3,460.	1,730.		1,730.
FORM 990-PF		TAX	ES	STATEMENT	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAXES FOREIGN TAXES		15. 2.	0.		0.
TO FORM 990-PF, PG	1, LN 18	17.	2.		0.
	_				

FORM 990-PF	OTHER E	XPENSES	STATEMENT	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT FEE ADMIN EXPENSES	36,005. 41.	36,005.		0. 41.
TO FORM 990-PF, PG 1, LN 23	36,046.	36,005.		41.
	FOOTN	OTES	S'	FATEMENT 5

THE FOUNDATION RECEIVED A DISTRIBUTION OF \$7,533,116 FROM THE ESTATE OF HILARY J. BOONE IN SEPTEMBER 2013 IN A NEW INVESTMENT ACCOUNT IN THE FOUNDATION'S NAME. THE BOOKKEEPER IN THE OFFICE WHICH MAINTAINS THE ACCOUNTS OF THE FOUNDATION INADVERTENTLY FAILED TO PROVIDE THE FOUNDATION'S TAX PREPARER WITH THE STATMENTS FOR THIS NEW ACCOUNT WHEN PROVIDING 2013 TAX REPORTING INFORMATION. AS A RESULT, THE FOUNDATION'S TAX PREPARER UNKNOWINGLY UNDER-REPORTED THE VALUE OF THE FOUNDATION'S ASSETS ON THE 2013 FORM 990-PF, AS IT WAS ORIGINALLY FILED. THIS RETURN IS BEING AMENDED TO REFLECT THE CORRECT VALUATION OF THE FOUNDATION'S ASSETS FOR 2013.

FORM 990-PF PART VI LINE 6A: 2013 ESTIMATED TAX PAYMENTS AND 2012 OVERPAYMENT CREDITED TO 2013 (AS ORIGINALLY FILED):	3,390.
LESS: 2013 OVERPAYMENT CREDITED TO 2014 ESTIMATED TAX ON RETURN AS ORIGINALLY FILED:	<1,625.>
2013 ESTIMATED TAX PAYMENTS AND 2012 OVERPAYMENT CREDITED TO 2013 (PER AMENDED RETURN):	1,765.

FORM 990-PF C	ORPORATE STOCK		STATEMENT	
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE		
JP MORGAN BONDS, MUTUAL FUNDS & CO 29,552 SHS HUMANA, INC. 7,510 SHS LIFEPOINT HOSPITALS, INC. 7,000 SHS BERKSHIRE HATHAWAY CL B	3,160,344. 1,914,251. 268,182. 801,080.	3,050,357. 182. 396,828.		
TOTAL TO FORM 990-PF, PART II, LI	NE 10B	6,143,857.	8,232,103	
FORM 990-PF	OTHER ASSETS		STATEMENT	
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE	
REIMBURSEMENT RECEIVABLE	0.	2,000.	2,000	
TO FORM 990-PF, PART II, LINE 15	0.	2,000.	2,000	
FORM 990-PF INTERES	T AND PENALTIES	· · · · · · · · · · · · · · · · · · ·	STATEMENT	
TAX DUE FROM FORM 990-PF, PART V LATE PAYMENT INTEREST	I		24 1	
TOTAL AMOUNT DUE			25	

FORM 990-PF		SUBSTANTIAL CONTRIBUTORS RT VII-A, LINE 10	STATEMENT	9
NAME OF CONTRIBUTOR		ADDRESS		
ESTATE OF HILARY J. BOONE		376 SOUTH BROADWAY LEXINGTON, KY 40508		

FORM 990-PF LATE PAYMENT INTEREST STA					STAT	EMENT 10
DESCRIPTION	DATE	AMOUNT	BALANCE	RATE	DAYS	INTEREST
TAX DUE EXTENSION PAYMENT DATE FILED	05/15/14 05/15/14 12/31/15	3,374. <3,350.>	3,374. 24. 25.	.0300	595	1.
TOTAL LATE PAYMENT	INTEREST					1.