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**Return of Private Foundation** or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

2013

▶ Do not enter Social Security numbers on this form as it may be made public.

Onen to Public Inspection

inter	nai Revi	enue Service   Information about Form 990-PF and its se	parate instructions is	at www.i	rs.gov/rorm	aanbir Eaber	to Lanne makeanon
For	calen	dar year 2013 or tax year beginning	, 2013, ;	and endin	g		, 20
N	ame of	foundation			A Employer	Identification number	
E	STEL	LE ABE & MARJORIE SANDERS TN FDN			63-619	0924	
N	umber	and street (or P O box number if mail is not delivered to street address)	R	oom/suite	B Telephone	number (see instructions	)
_P	о во	X 560			(256)5	35-0370	· · · · · · · · · · · · · · · · · · ·
	City or town, state or province, country, and ZIP or foreign postal code					tion application is pending,	check here
Н	UNTS	VILLE, AL 35804				,,	
G	Check	all that apply: Initial return Initial return	of a former public char	ıty	D 1. Foreig	n organizations, check he	re ▶ 🗌
		Final return Amended re	tum				050/ 44
		Address change Name change	ge ·		2. Foreig	in organizations meeting there and attach computation	le 85% test,
Н	Check	type of organization X Section 501(c)(3) exempt priv	ate foundation			foundation status was terr	
	Sect	ion 4947(a)(1) nonexempt charitable trust Other	taxable private foundati	on		07(b)(1)(A), check here	l í
1 1	air ma	arket value of all assets at J Accounting method	X Cash	Accrual	F If the four	ndation is in a 60-month te	rmination —
		year (from Part II, col. (c), Other (specify)				ction 507(b)(1)(B), check h	
	ine 16		e on cash basis.)				<del></del>
P:	art I	Analysis of Revenue and Expenses (The total of					(d) Disbursements
·		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		investment	(c) Adjusted net	for chantable purposes
		the amounts in column (a) (see instructions))	books	l in	come	income	(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	-	-			
	2	Check ► X if the foundation is not required to attach Sch B	,	<del></del>		#*************************************	<del>,,</del>
	3	Interest on savings and temporary cash investments	<u> </u>				
	4	Dividends and interest from securities	29,457		29,457	29,457	
	5a	Gross rents				-	***************************************
	ь	Net rental income or (loss)					<del>, 1 1111, , , 111</del>
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	6,123				<del></del>
	Ь	Gross sales price for all assets on line 6a 154,169		-	*** * -******	HI I' I .' III .'	<del></del>
	7	Capital gain net income (from Part IV, line 2)			6,123		<del></del>
	8	Net short-term capital gain			,	1,218	<del>                                      </del>
	9	Income modifications					
	10a	Gross sales less returns and allowances					······································
3	b	Less: Cost of goods sold					
; -	C	Gross profit or (loss) (attach schedule)	11	1 1 1 1 1 1 1 1 1 1 1 1	<del>!' </del>		<del>'                                    </del>
	11	Other income (attach schedule)		E.,.,			······
	12	Total. Add lines 1 through 11	35,580		35,580	30,675	<del></del>
	13	Compensation of officers, directors, trustees, etc	1,500		1,500		
s	14	Other employee salaries and wages	1,500				
nses	15	Pension plans, employee benefits					
en	ŀ	Legal fees (attach schedule)					
Administrative Expe	16a b	Accounting fees (attach schedule) STM108	1,090		1,090		
_e		Other professional fees (attach schedule) STM109	12,048		12,048		
aţį	C	Interest	12,040		12,010	- <u>-</u> .	<del></del>
str	17	Taxes (attach schedule) (see instructions) STM110	599		599		
<u>=</u>	18	,,	399		355		
ᄩ	19	Depreciation (attach schedule) and depletion				<del></del>	
Ă	20	Occupancy					
and	21	Travel, conferences, and meetings ECEIVED.	<del> </del>				
g	22	Printing and publications Other expenses (attach schedule)	1 100		1 100		
ţin	23	Other expenses (attach schedule)	1,100		1,100		<del> </del>
Operating	24	Total operating and administrative expenses.	16 335		16 220	İ	^
S <sub>P</sub>	0.5	Add lines 13 through 23	16,337		16,337		46.303
_	25	Contributions, gifts, grants paid CC	46,392		16 225		46,392
	26	Total expenses and disbursements. Add lines 24 and 25 .	62,729	=	16,337		46,392
	27	Subtract line 26 from line 12:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	а	Excess of revenue over expenses and disbursements .	(27,149	<del>}</del>			<del>, , , , , , , , , , , , , , , , , , , </del>
	Ь	Net investment income (if negative, enter -0-)			19,243		
	С	Adjusted net income (if negative, enter -0-)				30,675	

For Paperwork Reduction Act Notice, see instructions.

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End of year	

Don't I	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	year
Part I	should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
1.1	Cash - non-interest-bearing	17,745	27,084	27,084
2	Savings and temporary cash investments			
3	Accounts receivable ▶			
ĺ	Less. allowance for doubtful accounts			
4	Pledges receivable ▶			
	Less allowance for doubtful accounts			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			·
	disqualified persons (attach schedule) (see instructions)			
7	Other notes and loans receivable (attach schedule)	100 100 100 100 100 100 100 100 100 100		111 1
	Less: allowance for doubtful accounts		ì	
8 15	Inventories for sale or use	-		
ssets 6 0	Prepaid expenses and deferred charges			
₹   <sub>10a</sub>		863,862	827,374	957,177
- 1	Investments - corporate stock (attach schedule)			<u></u>
- 1	Investments - corporate bonds (attach schedule)			
11	Investments - land, buildings, and equipment basis			······································
''	Less accumulated depreciation (attach schedule)		Ì	
12	Investments - mortgage loans			· · . · ·
13	Investments - other (attach schedule)		· · · · · · · · · · · · · · · · · · ·	
14	Land, buildings, and equipment basis			······································
'-	Less accumulated depreciation (attach schedule)	Ī	Ì	
15	Other assets (describe >			
16	Total assets (to be completed by all filers - see the			
1.0	Instructions. Also, see page 1, item I)	881,607	854,458	984,261
17	Accounts payable and accrued expenses			
18	Grants payable			
	Deferred revenue			
20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities 61 61	Mortgages and other notes payable (attach schedule)			
ت   <sub>22</sub>	Other liabilities (describe )			
23	Total liabilities (add lines 17 through 22)	0	0	
- 23	Foundations that follow SFAS 117, check here X			
<sub>so</sub>	and complete lines 24 through 26 and lines 30 and 31.			
auces 24	Unrestricted			
	Temporarily restricted			
E 25	Permanently restricted	881,607	854,458	
or Fund Bal	Foundations that do not follow SFAS 117, check here	5517607		
ᇐ	and complete lines 27 through 31.			
้อ   <sub>27</sub>	Capital stock, trust principal, or current funds			
\$ 20	Paid-in or capital surplus, or land, bldg., and equipment fund			•
Assets 29	Retained earnings, accumulated income, endowment, or other funds			
8 29	Total net assets or fund balances (see instructions)	881,607	854,458	
30 31	Total liabilities and net assets/fund balances (see	002/00/		•
2   31		881,607	854,458	
Part II	I Analysis of Changes in Net Assets or Fund Balance		031,130	
	net assets or fund balances at beginning of year - Part II, column (a), line 3		1-1	
	net assets or fund balances at beginning or year - Part II, column (a), line of of-year figure reported on prior year's return)			881,607
				(27,149)
	r amount from Part I, line 27a			(21,149)
			<del></del>	854,458
	ines 1, 2, and 3			034,438
	eases not included in line 2 (itemize)	lumn (h) line 20		854,458
6 Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	iumin (b), line 30		Form 990-PF (2013)

Part IV Capital Gains	and Losses for rax on inves	stment income	<del>-</del>	_		
(a) List and descrit 2-story brick ware	be the kind(s) of property sold (e g , real est schouse, or common stock, 200 shs. MLC Co	ate,	(b) How acquired P-Purchase D-Donation	(c) Date acq (yr , mo , d	luired lay)	(d) Date sold (yr., mo , day)
1a See STM~134		<u>.</u>				
b	_					
С						
d		-				
е						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or o plus expens		(		or (loss) minus (g)
a 154,169			148,046			6,123
b						
С						
d						
e						
Complete only for assets show	ving gain in column (h) and owned by the	ne foundation on 1	2/31/69	(I) G	Sains (Col	(h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess over col (j)		col. (k)	), but not le	ess than -0-) or om col (h))
a					,	6,123
b		<del></del>				
С					,	
d		•				
е						
	f If gain, also	enter in Part I, line	7			
2 Capital gain net income or (net	capital loss) If (loss), ent	er -0- in Part I, line	7 }	2		6,123
3 Net short-term capital gain or (	loss) as defined in sections 1222(5) an	d (6):				
	8, column (c) (see instructions). If (loss		1			
Part I, line 8		·	<b>f</b>	3		1,218
Part V Qualification U	nder Section 4940(e) for Red	uced Tax on	Net Investme	ent Income	e	
For optional use by domestic priva	ite foundations subject to the section 4	940(a) tax on net in	nvestment income	e.)		
f section 4940(d)(2) applies, leave	this part blank.					
Was the foundation liable for the se	ection 4942 tax on the distributable amo	ount of any year in	the base period?			Yes X No
f "Yes," the foundation does not qu	ualify under section 4940(e). Do not cor	mplete this part.				
1 Enter the appropriate amount is	n each column for each year; see the ir	nstructions before	making any entrie	s.		
(a) Base period years	(b)		(c)		Distrik	(d) oution ratio
Calendar year (or tax year beginning	A du cata di accadificación di atribustación	Net value of no	(c) onchantable-use as:	sets (		vided by col (c))
2012	46,22	7	937,4	80	0.0	4931
2011	43,43	0	934,9	33	0.0	46453
2010	47,91	9	917,9	84	0.0	522
2009	48,49	3	934,7	61	0.0	51877
2008	51,21	9	975,2	72	0.0	52518
2 Total of line 1, column (d)				. 2	0.2	52358
3 Average distribution ratio for th	e 5-year base period - divide the total o	on line 2 by 5, or by	the			
number of years the foundation	has been in existence if less than 5 ye	ears		. 3	0.0	50472
4 Enter the net value of nonchan	table-use assets for 2013 from Part X,	line 5		. 4		869,089
5 Multiply line 4 by line 3				. 5		43,865
6 Enter 1% of net investment inc	ome (1% of Part I, line 27b)			. 6		192
7 Add lines 5 and 6				. 7		44,057
						<u>• • • • • • • • • • • • • • • • • •</u>
8 Enter qualifying distributions fro	om Part XII, line 4			. 8		46,392
	an line 7, check the box in Part VI, line				ee the	,
Part VI instructions			. •	_		

Pa	IT VIExcise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	e ins	structi	ons)	
1a	Exempt operating foundations described in section 4940(d)(2), check here   and enter "N/A" on line 1.	T			
•	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)	ŧ			
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check	<u> </u>	<del></del> -		192
	here   X and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of	ŧ			
_	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  Add lines 1 and 2	+-			192
3	Add lines 1 and 2	+			
4 5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	+			192
6	Credits/Payments:	╁			1 2 2
а	2013 estimated tax payments and 2012 overpayment credited to 2013   6a				
b	Exempt foreign organizations - tax withheld at source	1			
c	Tax paid with application for extension of time to file (Form 8868) 6c	-			
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d				
8	Enter any penalty for underpayment of estimated tax. Check here   If Form 2220 is attached 8	$\top$			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	1			192
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
11	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			Yes	No
	participate or intervene in 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	<u> </u>	X
	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.			-	
С	Did the foundation file Form 1120-POL for this year?	• •	1c	<u> </u>	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			Ī	ĺ
	(1) On the foundation		:		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			1	
2	on foundation managers   \$  Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	•	х
2	If "Yes," attach a detailed description of the activities			-	
3	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	1	Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		Х
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		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				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			1	
	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	ļ
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			İ	
	TN				
þ	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	• •	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			į į	
	4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes,"				v
40	complete Part XIV	• •	9		X
10	• •		10		х
	names and addresses		1 10 1	, 1	4.7

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its

chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?

X

4b

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Pa	rt VII-B	Statements Regarding Activitie	es for	Which For	m 472	0 May Be	Requi	red (continued	<u>)                                    </u>	
5a	Dunng th	e year did the foundation pay or incur any ar	nount to	•						
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes X No									
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on,									
	directly or indirectly, any voter registration drive?									
	(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No									
	(4) Provide a grant to an organization other than a charitable, etc., organization described in									
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)									
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational										
	purposes, or for the prevention of cruelty to children or animals? Yes X No									
b	b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in									
		ns section 53 4945 or in a current notice reg							5b	j l
		tions relying on a current notice regarding dis						▶ 🗍	-	
С	_	wer is "Yes" to question 5a(4), does the four						_		
		it maintained expenditure responsibility for th						Yes No		
		attach the statement required by Regulations								Ė
6a		undation, during the year, receive any funds			pay pre	emiums				
		onal benefit contract?						Yes X No		
b		undation, during the year, pay premiums, dir							6b	X
		6b, file Form 8870								
7a	At any tim	ne during the tax year, was the foundation a	party to a	a prohibited tax	shelter	transaction?	. [	Yes X No		
b	If "Yes," o	did the foundation receive any proceeds or ha	ave any	net income attr	ibutable	to the transa	ction?	<u> </u>	7b	
Pai	rt VIII	Information About Officers, Dire	ectors	, Trustees,	Found	dation Ma	nager	s, Highly Paid	Empl	oyees,
		and Contractors								
1 L	ist all offi	cers, directors, trustees, foundation mana	gers ar	d their compe						
		(a) Name and address		e, and average rs per week		ompensation not paid,		Contributions to oyee benefit plans		ense account allowances
See	990_OF	OV (a) Name and address		ed to position		nter -0-)		ferred compensation	ouler	1110Walices
SAM	JEL H P	APLANUS MD	DIREC	TOR						
PO I	BOX 560	, HUNTSVILLE, AL 35804		0	300 0		0		0	
THO	MIS SAN	MONS III	DIREC	TOR						
PO I	BOX 560	, HUNTSVILLE, AL 35804		0		300		0	·	0
DAV	ID STEW	ART	DIREC	TOR						
PO I	30X 560	, HUNTSVILLE, AL 35804	ļ	0		300		. 0		0
BREI	NDA CAN	NON	DIREC							
		, HUNTSVILLE, AL 35804	l	0		300		0		0
	-	tion of five highest-paid employees (other	r than th	ose included	on line	1 - see instr	uctions)	). If none, enter		
	NONE."			1		Τ			_	
			000	(b) Title, and a				(d) Contributions to employee benefit	(e) Expe	nse account,
	(a) Name a	nd address of each employee paid more than \$50	,000	hours per w devoted to po		(c) Comper	sation	plans and deferred compensation	other a	allowances
NON	<u>s</u>									
	<del></del>									
-										
						[				
			-	<del>  -</del>						
Total	Total number of other employees paid over \$50,000									
	number of	outer entiployees paid over 400,000	<u></u>			<u> </u>	· · · ·		Form 99	0-PF (2013)
EEA										,===,0,

ESTELLE ABE & MARJORIE SANDERS TN FDN

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All other program-related investments. See instructions

Total. Add lines 1 through 3

3

EEA

Ра	• see instructions.)	1 tour	idations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes.		
а	Average monthly fair market value of secunties	1a	838,248
b	Average of monthly cash balances	1b	44,076
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	882,324
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	882,324
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	13,235
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	869,089
6	Minimum investment return. Enter 5% of line 5	6	43,454
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating		
	foundations and certain foreign organizations check here ▶ ☐ and do not complete this	part.	)
1	Minimum investment return from Part X, line 6	1	43,454
2a	Tax on investment income for 2013 from Part VI, line 5 2a 192		
b	Income tax for 2013. (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	192
3	Distributable amount before adjustments Subtract line 2c from line 1	3	43,262
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	43,262
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	43,262
Par	TXII Qualifying Distributions (see instructions)	•	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
' a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	46,392
b	Program-related investments - total from Part IX-B	1b	10,002
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	<del></del>	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	V
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 .	4	46,392
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
-	Enter 1% of Part I, line 27b (see instructions)	5	192
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	46,200
•	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	ــــــ	
	qualifies for the section 4940(e) reduction of tax in those years.	.54114	au011
	quanto to the section totale, reduction of tax in those years.		

ESTELLE ABE & MARJORIE SANDERS TN FDN 63-6190924 Form 990-PF (2013) Part XIII Undistributed Income (see instructions) (d) 2013 (b) Years pnor to 2012 (a) Corous Distributable amount for 2013 from Part XI, 1 43,262 Undistributed income, if any, as of the end of 2013 2 46,392 a Enter amount for 2012 only . . . . . . . . . . . . b Total for prior years: Excess distributions carryover, if any, to 2013 3 a From 2008 . . . . . . . . . **b** From 2009 . . . . . . . . . c From 2010 . . . . . . . . . . **d** From 2011 . . . . . . . . e From 2012 . . . . . . . . . Qualifying distributions for 2013 from Part XII, line 4 ▶ \$ 46,392 a Applied to 2012, but not more than line 2a 46,392 Applied to undistributed income of prior years (Election required - see instructions) . . . . . c Treated as distributions out of corpus (Election d Applied to 2013 distributable amount . . . . . Remaining amount distributed out of corpus . . . Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: Corpus Add lines 3f, 4c, and 4e Subtract line 5 . b Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . . . . . . . . . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b Taxable amount - see instructions . . . . . . . . . Undistributed income for 2012 Subtract line 4a from line 2a Taxable amount - see instructions ........... Undistributed income for 2013 Subtract lines 4d and 5 from line 1. This amount must be 43,262 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions) . . . Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2009 . . . . . Excess from 2010 . . . . .

Excess from 2011 . . . . . Excess from 2012 . . . . . Excess from 2013 . . . . .

Par	XIV Private Operating Four				)					
1a										
•	foundation, and the ruling is effective for 2013, enter the date of the ruling									
b		er the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)								
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year Prior 3 years (e) Total								
	investment return from Part X for	(a) 2013	(b) 2012	(c) 2011	(d) 2010					
	each year listed					<del> </del>				
b	85% of line 2a									
С	Qualifying distributions from Part XII, line 4 for each year listed									
d	Amounts included in line 2c not used directly for active conduct of exempt activities .	<u> </u>								
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c									
3	Complete 3a, b, or c for the alternative test relied upon									
а	"Assets" alternative test - enter (1) Value of all assets	<u>.</u>								
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)									
b	"Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed									
С	"Support" alternative test - enter:									
	(1) Total support other than gross									
	investment income (interest, dividends, rents, payments on									
	securities loans (section			İ						
	512(a)(5)), or royalties) [ (2) Support from general public					<del></del>				
	and 5 or more exempt									
	organizations as provided in			,						
	section 4942(j)(3)(B)(iii)									
	(3) Largest amount of support from an exempt organization									
	(4) Gross investment income									
Part		ion (Complete th	nis part only if th	ne foundation ha	d \$5,000 or more in	n assets at				
	any time during the year				•					
1	Information Regarding Foundation Ma									
а	List any managers of the foundation who	have contributed more	than 2% of the total	contributions received b	y the foundation					
	before the close of any tax year (but only	if they have contribute	ed more than \$5,000)	(See section 507(d)(2)	)					
b	List any managers of the foundation who				portion of the					
	ownership of a partnership or other entity		on has a 10% or grea	ter interest.						
2	Information Regarding Contribution, C	Grant, Gift, Loan, Sch	olarship, etc., Progra	ams:						
				le organizations and do						
	unsolicited requests for funds. If the foun		ints, etc. (see instructi	ons) to individuals or o	rganizations under					
	other conditions, complete items 2a, b, c									
а	The name, address, and telephone numb	per or e-mail of the pers	son to whom application	ons snould be addresse	ea:					
	990APP		<del></del>	<del></del>	<del></del>					
b	The form in which applications should be	submitted and informa	ition and materials the	y should include.						
	Any submission deadlines:									
с — <u>.                                    </u>	Any submission deadlines:			-13-13-3 6 44 6		· · · · · · · · · · · · · · · · · · ·				
d	Any restrictions or limitations on awards, factors:	such as by geographic	cai areas, chantable fi	eias, kinds ot institution	s, or other					
	100013									

Part XV Supplementary Information (continued)

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

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
VOLUNTEERS IN MEDICINE			PROVIDE MEDICAL	
185 HOSPITAL ROAD			CARE FOR	
WINCHESTER, TN 37398	NA		UNINSURED	6,000
PARTNERS FOR HEALING			PROVIDES FREE	
402 INTERESTATE DRIVE			PRIMARY MEDICAL	
MANCHESTER, TN 37355	NA		CLINIC	4,000
CASA WORKS INC			TRAINS &	
224 WEST FORT STREET			SUPERVISES VOL TO	
SEWANEE, TN 37375	NA		ADVOCATE FOR	2,500
WINGS OF HOPE WIDOWS MINISTRY INC			PRODUCTION OF	
1309 NORTH HIGH STREET			TRAINING DVD FOR	
WINCHESTER, TN 37398	NA .		MINISTRY FOR	2,000
GOOD SAMARITAN MINISTRIES			EMERGENCY	
1725 DECHERD BLVD			ASSISTANCE WITH	
DECHERD, TN 37324	NA		FOOD & UTILITY	2,000
HAVEN OF HOPE			PROVIDE SUPPORT	
PO BOX 1271			VICTIMS OF	
MANCHESTER, TN 37349	NA		DOMESTIC	3,892
ALMOST HOME TRANSITIONAL HOUSING			PROVIDE TEMPORARY	
1810 SPARP SPRINGS ROAD			HOUSING HOMELESS	
WINCHESTER, TN 37398	NA		OF FRANKLIN CO	1,000
SALVATION ARMY FRANKLIN COUNTY			PROVIDE FINANCIAL	
PO BOX 312			ASSISTANCE TO	
WINCHESTER, TN 37398	NA		NEEDY FAMILIES	2,000
Total	<u></u>		▶ 3a	
b Approved for future payment				
		·		
Total	<u>.</u> <u></u>			

63-6190924

Part XV Supplementary Information (continued)

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

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
OLD JAIL MUSEUM INC				
400 DINAH SHORE BLVD			ONGOING BUILDING	
WINCHESTER, TN 37398	NA AN		REPAIRS	5,000
WINCHESTER LION CLUB			PROVIDE VISION	
6658 LYNCHBURG ROAD			IMPAIRMENT CARE	
WINCHESTER, TN 37398	NA		NEEDS IN FRANKLIN	3,000
RAISE A READER IN FRANKLIN COUNTY			FUNDING TO	
107 N PORTER STREET			PURCHASE BOOKS	
WINCHESTER, TN 37398	NA		FOR CHILDREN	1,500
ESTILL SPRINGS LION CLUB			FUNDING EYE CARE	
1742 FLETCHER ROAD			FOR RESIDENTS	
ESTILL SPRINGS, TN 37330	NA		UNABLE TO PAY	1,500
HORSE PLAY INC			PROVIDES EQUINE	
303 8TH AVE N			THERAPY PROG FOR	
DECHERD, TN 37324	NA		SP NEEDS CHILDREN	2,500
DECHERD LION CLUB			FURNISHING EYE	
PO BOX 500			CARE FOR INDIGENT	
DECHERD, TN 37324	NA		AND WORKING POOR	2,500
FRANKLIN COUNTY SR CITIZENS INC			UPKEEP OF THE	
74 CLOVER DRIVE	1		EXERCISE EQUIP	
WINCHESTER, TN 37398	NA		FOR SR CITIZENS	2,500
SOUTH MIDDLE SCHOOL			SUPPLIES FOR LIFE	
601 W CUMBERLAND STREET			SKILLS CL FOR SP	
COWAN, TN 37318	NA		NEEDS STUDENTS	3,500
Total			▶ 3a	
b Approved for future payment				
•				
				,
	1		1	

Part XV | Supplementary Information (continued)

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial continuotor			
a Paid during the year				
FRANKLIN COUNTY ADULT ACTIVITY INC			PROVIDE ART	
702 HUNDRED OAKS STREET			SUPPLIES TO	
WINCHESTER, TN 37398	NA		CLIENTS OF DAY	1,000
			i	
		<u>'</u>		
	ł			
	ļ			
Total	<u> </u>	<u> </u>	▶ 3a	46,392
b Approved for future payment				
				-
			İ	
		1		
			l	
,				
Total				

EEA

P	art XVI-A Analysis of Income-Producing	Activities				
En	ter gross amounts unless otherwise indicated	Unrelate	d business income	Excluded by section 512, 513, or 514		(e)
٠	•	(a) Business	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1	Program service revenue:	code	, iman,	Excidence dede	7 11100111	 
	a			<del> </del>		<del></del>
	b			ļ		<del> </del>
	·					
	d			<del></del>		
	e					
	Food and contracts from government agencies				-	· · · · ·
2	g Fees and contracts from government agencies Membership dues and assessments	<u> </u>				
	Interest on savings and temporary cash investments					<u> </u>
	Dividends and interest from securities		-	1		29,457
	Net rental income or (loss) from real estate:					<del></del>
•	a Debt-financed property					<del>,</del>
	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 than inventory					6,123
9	Net income or (loss) from special events				•	
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a			<u> </u>		
	b					
	С					
	d					
	е					
	Subtotal. Add columns (b), (d), and (e)					35,580
	Total. Add line 12, columns (b), (d), and (e)				13	35,580
	e worksheet in line 13 instructions to verify calculations)  art XVI-B Relationship of Activities to the	A	liahmant of Eve	ampt Dura		<del></del>
	ine No. Explain below how each activity for which inco	ome is report	ted in column (e) of P	art XVI-A contr	buted importantly to the	
	▼ accomplishment of the learned action is exempt be	arpecee (eur	or than by providing .	and to out ,	, a. p. 2000, (2000 ii. c. 200	20.10.17
		,				
				-		
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						<del></del>
					<del>-</del>	,
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_			<del></del> .			
		<del>_</del>				
_						
EEA				<del></del>		Form <b>990-PF</b> (2013)
						\·-/

Part XVII

Information Regarding Transfers To and Transactions and Relationships With Noncharitable

**Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described Yes No 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: 1a(1) Х Х 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) 1b(3) (4) Reimbursement arrangements 1b(4) 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) c 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 (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described 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 I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, claration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign May the IRS discuss this return Here with the preparer shown below Yes No Signature of officer Print/Type preparer's name Check X if Paid Coyle O Clark self-employed P00295188 **Preparer** Firm's EIN Clark Knies & Crepshaw PLLC ▶ 62 Firm's name 220 N Jefferson St Phone no Use Only Firm's address Winchester TN 37398 931-967-3877

List of Officers, Directors, Trustees, and Key Employees

1 List all'officers, directors, trustees, and key employees for the	year even if they wer	e not compensated		•
(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Form W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
MELINDA HUFFMAN DIRECTOR				
PO BOX 560, HUNTSVILLE, AL 35804	0	300	0	0
		_		
	<del> </del>			
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,	Federal Supporting Statements	2013 PG 01
Name(s) as shown on return		FEIN
ESTELLE ABE	& MARJORIE SANDERS TN FDN	63-6190924

FORM 990PF, PART II, LINE 10(A) STATEMENT #136
INVESTMENTS: STATE AND LOCAL GOVERNMENT OBLIGATION SCHEDULE

CATEGORY	BOOK VALUE (BOY)	BOOK VALUE (EOY)	FMV (EOY)
INVESTMENTS-EQUITIES	351,665	359,551	486,160
INVESTMENTS-FIXED	512,197	467,823	471,017
TOTALS	863,862	827,374	957,177

2013 PG 01	Your Social Security Number 63-6190924	STATEMENT #103			PG 01 STATEMENT #108				,	
nents		37	CHARITABLE PURPOSE 0	0	EDULE	CHARITABLE PURPOSE	0			
Federal Supporting Statements		– OTHER EXPENSES SCHEDULE	ADJUSTED NET INCOME	0	FORM 990PF, PART I, LINE 16(B) - ACCOUNTING FEES SCHEDULE	ADJUSTED NET INCOME 0	0			
Federal Su		LINE 23	NET INVESTMENT 1,100	1,100	PART I, LINE 16(B)	NET INVESTMENT 1,090	1,090			
	FDN	FORM 990PF, PART I,	REVENUE AND EXPENSES 1,100	1,100	FORM 990PF,	REVENUE AND EXPENSES 1,090	1,090			
	Name(s) as shown on return ESTELLE ABE & MARJORIE SANDERS TN FDN		DESCRIPTION INSURANCE	TOTALS		DESCRIPTION TAX SERVICES	TOTALS			

STATEMENT AND STATEMENT   ST			Federal Su	Federal Supporting Statements	nents	2013 PG 01	
FEES   FORM 990PF, PART 1, LINE 16CC) - OTHER PROFESSIONAL PEES SCHEDULE	ame(s) as shown on return TELLE ABE & MARJORIE SANDERS TN	FDN				Iţ Z	,
FEES		FORM 990PF, PAR1	_	HER PROFESSIONAL FEES	SCHEDULE	STATEMENT #109	
12,048	ESCRIPTION	REVENUE AND EXPENSES	NET INVESTMENT	ADJUSTED NET INCOME	CHARITABLE PURPOSE		
12,048 12,048 0	RUSTEE FEES	12,048	12,048	0	0		
FORM 990PF, PART 1, LINE 18 - TAXES SCHEDULE  REVENUE NET ADJUSTED CHARITABLE TAXES AB2 482 0 0 0  1 TAXES PAID 117 0 0 0  559 599 0 0 0	OTALS	12,048	12,048	0			
TION AND EXPENSES INVESTMENT NET INCOME PURPOSE  TAXES 482 482 0 0 0  I TAXES PAID 117 0 0 0  599 599 0 0		FORM	990PF, PART I, LINE	18 - TAXES SCHEDULE		PG 01 STATEMENT #110	· · · · · · · · ·
TAXES PAID AND EXPENSES INVESTMENT NET INCOME PURPOSE TAXES PAID 117 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			L Z	A POLITICAL PROPERTY OF THE POLITICAL PROPER	a lastitasus		-
	SCRIPTION ICOME TAXES OREIGN TAXES PAID	AND EXPENSES 482	INVESTMENT 482	NET INCOME  0	PURPOSE 0		
	)TALS	299	299	0	0		
				÷			
							•

		Federal	Supporting	Federal Supporting Statements	Į\$		7013	,
Name(s) as shown on retum							Your Social S	Your Social Security Number
ESTELLE ABE & MARJORIE SANDERS TN FDN							63-6190924	
FOF	RM 990-PF, PART	FORM 990-PF, PART IV, CAPITAL GAINS AND LOSSES INFORMATION (OVERFLOW)	S AND LOSSES IN	FORMATION (OVER	(FLOW)		STATEMENT #134	, 55L# 1N
	P-PURCHASE					COST OR		GAINS MINUS
DESCRIPTION	D-DONATION	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPRECIATION	OTHER BASIS	GAIN OR LOSS	EXCESS OR LOSSES
FEDERAL HOME LOAN MTG CORP POOL	<u>a</u>	2012-07-09	2013-06-17	753		810	(25)	(25)
FEDERAL HOME LOAN MTG CORP POOL	<u>~</u>	2012-07-09	2013-03-15	432		459	(22)	(22)
FEDERAL HOME LOAN MTG CORP POOL	<b>a</b> .	2012-07-09	2013-04-15	209		539	(30)	(30)
FEDERAL NATIONAL MORTGAGE ASSN POOL	a.	2012-07-09	2013-12-26	174		179	(5)	(5)
FEDERAL NATIONAL MORTGAGE ASSN POOL	α.	2011-11-04	2013-12-26	546		258	(6)	(6)
FEDERAL NATIONAL MORTGAGE ASSN POOL	<b>a</b>	2013-07-11	2013-12-26	2,039		2,171	(132)	(132)
JOHNSON CTLS INC COM	<u>o</u> .	2012-08-14	2013-03-21	2,756		2,097	629	629
TIFFANY & CO	۵.	2012-12-06	2013-07-16	3,454		2,632	822	822
UNITED STATES TREASURY	۵	2012-12-11	2013-07-15	28,738		28,864	(126)	(126)
AT & T	۵.	2008-07-08	2013-07-11	1,152		286	165	165
ALLERGAN INC	۵.	2007-10-19	2013-07-16	6,414		4,642	1,772	1,772
BHP BILLITON FIN USA LTD	۵	2012-02-21	2013-06-11	1,007		866	6	6
CA INC	<b>△</b>	2010-03-26	2013-10-09	1,115		1,009	106	106
CISCO SYS INC COM	۵	2010-12-23	2013-07-16	6,080		5,551	529	529
CITIGROUP INC	۵	2010-12-13	2013-04-29	4,133		4,364	(231)	(231)
COMCAST CORP	۵	2009-07-08	2013-07-11	1,160		1,011	149	149
CREDIT SUISSE NEW YORK	۵	2009-07-07	2013-10-09	1,029		1,054	(25)	(25)
EMERSON ELECTRIC CO	۵	2011-08-25	2013-07-16	5,604		2,431	173	173
FEDERAL HOME LOAN MTG CORP POOL	۵.	2011-08-11	2013-10-15	8,098		8,614	(516)	(516)
FEDERAL NATIONAL MORTGAGE ASSN	۵.	2011-11-04	2013-08-09	2,235		2,239	(4)	(7)
FEDERAL HOME LOAN MTG CORP	۵	2012-07-09	2013-03-11	2,099		2,137	(38)	(38)
FEDERAL HOME LOAN MTG CORP	۵	2012-07-09	2013-07-11	1,008		1,013	(5)	(5)
FEDERAL NATIONAL MORTGAGE ASSN POOL	<b>a</b> .	2011-11-04	2013-07-25	30,593		32,268	(1,675)	(1,675)
GENERAL ELECTRIC	<b>a</b> .	2010-05-20	2013-11-12	5,109		5,098	11	11
GOLDMAN SACHS GROUP INC	۵.	2010-05-20	2013-02-11	1,261		1,098	163	163
HEINZ H J CO	۵	2012-03-15	2013-03-21	8,042		5,905	2,137	2,137
INTERNATIONAL BUSINESS MACHINES	<u>~</u>	2012-02-02	2013-05-09	1,040		1,037	2	3
JOHNSON CTLS INC COM	۵	2012-08-14	2013-03-21	5,167		5,020	147	147
LAABORATORY CORP AMER HLDGS	<b>a</b> L	2011-10-06	2013-05-15	6,785		5,601	1,184	1,184
MERRILL LYNCH & CO	۵	2009-07-23	2013-07-11	1,154		966	158	158
MORGAN STANLEY	۵.	2011-07-08	2013-10-09	2,081		2,089	(8)	(8)
ONTARIO	a.	2011-01-28	2013-06-11	1,007		1,000	7	7
ORACLE CORP	۵	2008-07-08	2013-07-11	1,163		1,002	161	161
STRYKER CORP	۵.	2008-02-15	2013-05-15	3,733		3,795	(62)	(62)

		Federal	Federal Supporting Statements	ı Statement	Ş		2013 86 02	
Name(s) as shown on return ESTELLE ABE & MARJORIE SANDERS TN FDN							Your Social Secui 63-6190924	Your Social Security Number 63-6190924
Q	<b>JRM 990-PF, PART</b>	FORM 990-PF, PART IV, CAPITAL GAINS AND LOSSES INFORMATION (OVERFLOW)	S AND LOSSES IN	CORMATION (OVER	:FLOW)		STATEME	STATEMENT #134
	P-PURCHASE					COST OR		GAINS MINUS
DESCRIPTION	D-DONATION	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPRECIATION	OTHER BASIS	GAIN OR LOSS	EXCESS OR LOSSES
TARGET CORP CALLABLE	۵.	2008-07-08	2013-08-09	1,142		166	151	151
TEVA PHARMA	۵.	2011-11-09	2013-01-07	4,092		4,002	06	06
TIME WARNER CORP	۵	2009-08-11	2013-05-09	1,234		1,099	135	135
UNITED STATES TREASURY	۵.	2011-02-14	2013-09-12	1,018		176	77	77
UNITED STATES TREASURY INFLATION IN	۵.	2011-08-25	2013-03-11	1,163		1,072	91	91
WACHOVIA CORP	۵.	2008-07-08	2013-08-09	1,147		973	174	174
TOTAL				154,169		148,046	6,123	6,123
	FORM 99	FORM 990PF, PART I, LINE	I, LINE 13 - SUBSIDIARY SCHEDULE	Y SCHEDULE			SUBSIDI	PG 01 SUBSIDIARY STATEMENT
					1			
DESCRIPTION A DIBECTORS	REVENUE AND EXPENSES 4 500	NEI INVESTMENT 1 500	ADJUSIED NET INCOME	c	CHAKITABLE PURPOSE			
COMPENSALION OF DIRECTORS	00671	0000,1		) )				
TOTALS ===	1,500	1,500		0	0			
								•