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Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2013Open to Public
InspectionDo not enter Social Security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.**A** For the 2013 calendar year, or tax year beginning **JUL 1, 2013** and ending **JUN 30, 2014****B** Check if applicable

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization
HOLY NAME OF JESUS HOSPITAL TRUST
C/O REGIONS BANK - TRUST DEPT.

Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite
1901 6TH AVENUE NORTH 300City or town, state or province, country, and ZIP or foreign postal code
BIRMINGHAM, AL 35203**F** Name and address of principal officer: **REGIONS BANK - TRUST DEPT**
1901 6TH AVENUE NORTH, SUITE 300, BIRMINGHAM**D** Employer identification number**63-6117334****E** Telephone number
(205) 326-7219**G** Gross receipts \$ **4,414,138.98****H(a)** Is this a group return for subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number **0928****I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no) ☐ 4947(a)(1) or ☐ 527**J** Website: **N/A****K** Form of organization ☐ Corporation ☒ Trust ☐ Association ☐ Other**L** Year of formation **1978** **M** State of legal domicile **AL****Part I Summary****1** Briefly describe the organization's mission or most significant activities **TO BENEFIT AND ENHANCE MEDICAL SERVICES IN THE STATE OF ALABAMA****2** Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.**3** Number of voting members of the governing body (Part VI, line 1a)**3 1****4** Number of independent voting members of the governing body (Part VI, line 1b)**4 0****5** Total number of individuals employed in calendar year 2013 (Part V, line 2a)**5 0****6** Total number of volunteers (estimate if necessary)**6 0****7a** Total unrelated business revenue from Part VIII, column (C), line 12**7a 0.00****b** Net unrelated business taxable income from Form 990-T, line 34**7b 0.00****8** Contributions and grants (Part VIII, line 1h)**Prior Year Current Year****0.00 0.00****9** Program service revenue (Part VIII, line 2g)**159,955.53 158,790.70****10** Investment income (Part VIII, column (A), lines 3, 4, and 7d)**565,799.54 593,738.04****11** Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)**23.64 18.43****12** Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)**725,778.71 752,547.17****13** Grants and similar amounts paid (Part IX, column (A), lines 1-3)**325,400.00 1,027,013.00****14** Benefits paid to or for members (Part IX, column (A), line 4)**0.00 0.00****15** Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)**197,572.62 195,500.40****16a** Professional fundraising fees (Part IX, column (A), line 11e)**0.00 0.00****b** Total fundraising expenses (Part IX, column (D), line 25) **0.00****17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)**207,620.65 215,039.74****18** Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)**730,593.27 1,437,553.14****19** Revenue less expenses. Subtract line 18 from line 12**-4,814.56 -685,005.97****20** Total assets (Part X, line 16)**Beginning of Current Year End of Year****25,240,210.88 24,235,204.91****21** Total liabilities (Part X, line 26)**1,60,000.00 640,000.00****22** Net assets or fund balances Subtract line 21 from line 20**24,228,010.88 23,595,204.91****Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign HereSignature of officer **Regions Bank - Trust Department, Trustee**
Type or print name and titleDate **9-30-2014****Paid**Print/Type preparer's name
STEVEN N. SMITH, CPAPreparer's signature **Steven N. Smith**Date **9-24-2014**Check ☐ if self-employedPTIN **P00165772****Preparer**Firm's name **BARFIELD, MURPHY, SHANK, & SMITH, LLC**Firm's EIN **46-1498870****Use Only**Firm's address **1121 RIVERCHASE OFFICE RD
BIRMINGHAM, AL 35244**Phone no **205-982-5500**

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

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Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III ☐

1 Briefly describe the organization's mission
TO BENEFIT AND ENHANCE MEDICAL SERVICES IN THE STATE OF ALABAMA

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code) (Expenses \$ 1,234,897.74 including grants of \$ 1,027,013.00) (Revenue \$ 158,790.70)
SEE ATTACHED

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 1,234,897.74

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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	2	X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a	X
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b	X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a	X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

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Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
28a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

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Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country <u>See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.</u>		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI ☒

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1	
1b Enter the number of voting members included in line 1a, above, who are independent.	0	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6 Did the organization have members or stockholders?		X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?		X
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?		X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13.		X
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.		
13 Did the organization have a written whistleblower policy?		X
14 Did the organization have a written document retention and destruction policy?		X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	X	
b Other officers or key employees of the organization		X
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed: **NONE**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **REGIONS BANK - TRUST DEPT. - (205) 326-7219**
1901 6TH AVENUE NORTH, SUITE 300, BIRMINGHAM, AL 35203

Check if Schedule O contains a response or note to any line in this Part VII

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Sub-total								195,500.40	0.00	0.00
c Total from continuation sheets to Part VII, Section A								0.00	0.00	0.00
d Total (add lines 1b and 1c)								195,500.40	0.00	0.00

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 1

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
DONALD R. GARRIS GADSDEN, AL,	CONSULTING SVCS/DEFERRED COMPEN	184,520.76

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 1

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Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f					
	g Noncash contributions included in lines 1a-1f \$						
	h Total. Add lines 1a-1f						
Program Service Revenue	2 a MORTGAGES & NOTES	Business Code	900099	158,790.70	158,790.70		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			158,790.70			
	3 Investment income (including dividends, interest, and other similar amounts)			482,801.15			482,801.15
4 Income from investment of tax-exempt bond proceeds							
5 Royalties							
Other Revenue	6 a Gross rents	(i) Real	(ii) Personal				
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss)			110,936.89			110,936.89
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a					
	b Less: direct expenses	b					
	c Net income or (loss) from fundraising events						
	9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
	10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
	Miscellaneous Revenue			Business Code			
11 a MISCELLANEOUS INCOME		900099	18.43			18.43	
b							
c							
d All other revenue							
e Total. Add lines 11a-11d			18.43				
12 Total revenue. See instructions			752,547.17	158,790.70	0.00	593,756.47	

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Form 990 (2013)

HOLY NAME OF JESUS HOSPITAL TRUST

C/O REGIONS BANK - TRUST DEPT.

Form 990 (2013)

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

☒ X

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	1,027,013.00	1,027,013.00		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	195,500.40		195,500.40	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management				
b Legal	4,454.98	4,454.98		
c Accounting	7,155.00		7,155.00	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O)	203,020.76	203,020.76		
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	100.00	100.00		
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	309.00	309.00		
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a _____				
b _____				
c _____				
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	1,437,553.14	1,234,897.74	202,655.40	0.00
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Check here ☐ if following SOP 98-2 (ASC 958-720)

HOLY NAME OF JESUS HOSPITAL TRUST
C/O REGIONS BANK - TRUST DEPT.

Form 990 (2013)

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Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	1,933,745.22	2	1,152,664.21
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net	6,128,674.13	7	6,016,295.45
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b	10c	
	11 Investments - publicly traded securities	16,977,790.53	11	17,066,244.25
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	1.00	15	1.00
16 Total assets. Add lines 1 through 15 (must equal line 34)	25,040,210.88	16	24,235,204.91	
Liabilities	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	760,000.00	25	640,000.00
	26 Total liabilities. Add lines 17 through 25	760,000.00	26	640,000.00
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☐ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets		27	
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ☒ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds	24,280,210.88	30	23,595,204.91
	31 Paid-in or capital surplus, or land, building, or equipment fund	0.00	31	0.00
	32 Retained earnings, endowment, accumulated income, or other funds	0.00	32	0.00
	33 Total net assets or fund balances	24,280,210.88	33	23,595,204.91
34 Total liabilities and net assets/fund balances	25,040,210.88	34	24,235,204.91	

Form 990 (2013)

HOLY NAME OF JESUS HOSPITAL TRUST
C/O REGIONS BANK - TRUST DEPT.

Form 990 (2013)

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Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	752,547.17
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,437,553.14
3	Revenue less expenses. Subtract line 2 from line 1	3	-685,005.97
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	24,280,210.88
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.00
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	23,595,204.91

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII ☐

- 1 Accounting method used to prepare the Form 990: ☒ Cash ☐ Accrual ☐ Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both.
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both.
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b		X
2c		
3a		X
3b		

Form 990 (2013)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2013

Open to Public
Inspection

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

Name of the organization **HOLY NAME OF JESUS HOSPITAL TRUST**
C/O REGIONS BANK - TRUST DEPT.

Employer identification number
63-6117334

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☒ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
- a ☐ Type I b ☐ Type II c ☒ Type III - Functionally integrated d ☐ Type III - Non-functionally integrated
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**.
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? ☐
- (ii) A family member of a person described in (i) above? ☐
- (iii) A 35% controlled entity of a person described in (i) or (ii) above? ☐
- h Provide the following information about the supported organization(s).

	Yes	No
11g(i)		X
11g(ii)		X
11g(iii)		X

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
ROMAN CATHOLIC CHU		1		X		X		X	0.00
Total	1								0.00

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2013

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ☐		
b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ☐		
17a 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ☐		
b 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ☐		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐		

Schedule A (Form 990 or 990-EZ) 2013

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► ☐

b 33 1/3% support tests - 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

HOLY NAME OF JESUS HOSPITAL TRUST

Schedule A (Form 990 or 990-EZ) 2013 C/O REGIONS BANK - TRUST DEPT.

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Part IV **Supplemental Information.** Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12

Also complete this part for any additional information. (See instructions)

Lined area for supplemental information.

SCHEDULE D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.

OMB No 1545-0047

2013Open to Public
Inspection▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.Name of the organization **HOLY NAME OF JESUS HOSPITAL TRUST**
C/O REGIONS BANK - TRUST DEPT.Employer identification number
63-6117334**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		☐ Yes ☐ No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (e.g., recreation or education)	☐ Preservation of an historically important land area
☐ Protection of natural habitat	☐ Preservation of a certified historic structure
☐ Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
(ii) Assets included in Form 990, Part X	▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items.

a Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
b Assets included in Form 990, Part X	▶ \$ _____

HOLY NAME OF JESUS HOSPITAL TRUST
C/O REGIONS BANK - TRUST DEPT.

Schedule D (Form 990) 2013

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Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply).

- a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

- c Beginning balance
d Additions during the year
e Distributions during the year
f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ► _____ %
b Permanent endowment ► _____ %
c Temporarily restricted endowment ► _____ %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i) unrelated organizations
(ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) 0.00

Schedule D (Form 990) 2013

HOLY NAME OF JESUS HOSPITAL TRUST
C/O REGIONS BANK - TRUST DEPT.

Schedule D (Form 990) 2013

63-6117334 Page 3

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation. Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ANNUITY CONTRACT	640,000.00
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☐

Schedule D (Form 990) 2013

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

HOLY NAME OF JESUS HOSPITAL TRUST
C/O REGIONS BANK - TRUST DEPT.

Employer identification number
63-6117334

OMB No. 1545-0047

2013

Open to Public
Inspection

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JUDSON COLLEGE 302 BIBB STREET MARION, AL 36756	63-0288850	501(C)(3)	992,013.00	0.00	BOOK	NONE	ASSIST WITH COSTS ASSOCIATED WITH BENEFITING AND ENHANCING HEALTH/MEDICAL SERVICES
CASA OF MADISON COUNTY 701 ANDREW JACKSON WAY NE HUNTSVILLE, AL 35801	63-0835099	501(C)(3)	30,000.00	0.00	BOOK	NONE	ASSIST WITH COSTS ASSOCIATED WITH BENEFITING AND ENHANCING HEALTH/MEDICAL SERVICES

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

332101
10-29-13

Schedule I (Form 990) (2013)

HOLY NAME OF JESUS HOSPITAL TRUST
C/O REGIONS BANK - TRUST DEPT.

63-6117334

Page 2

Schedule I (Form 990) (2013)

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: JUDSON COLLEGE

(H) PURPOSE OF GRANT OR ASSISTANCE: ASSIST WITH COSTS ASSOCIATED WITH
BENEFITING AND ENHANCING HEALTH/MEDICAL SERVICES IN THE STATE OF ALABAMA.

NAME OF ORGANIZATION OR GOVERNMENT: CASA OF MADISON COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: ASSIST WITH COSTS ASSOCIATED WITH
BENEFITING AND ENHANCING HEALTH/MEDICAL SERVICES IN THE STATE OF ALABAMA.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization	HOLY NAME OF JESUS HOSPITAL TRUST C/O REGIONS BANK - TRUST DEPT.	Employer identification number 63-6117334
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FORM 990, PART VI, SECTION A, LINE 8B:

EXPLANATION: THE TRUST DOES NOT HAVE COMMITTEES THAT HAVE THE AUTHORITY TO
ACT ON BEHALF OF THE GOVERNING BODY.

FORM 990, PART VI, SECTION B, LINE 11:

EXPLANATION: UPON COMPLETION OF THE ORGANIZATION'S FORM 990, THE RETURN IS
PRESENTED TO THE TRUST'S DESIGNATED TRUST OFFICER AT REGIONS BANK AND TO
THE TRUST'S OUTSIDE LEGAL COUNSEL FOR REVIEW AND APPROVAL. ONCE THESE
INDIVIDUALS HAVE REVIEWED AND APPROVED THE FORM 990, THE RETURN IS FILED
WITH THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, SECTION B, LINE 12:

EXPLANATION: THE TRUST DOES NOT HAVE A WRITTEN CONFLICT OF INTEREST POLICY,
BUT THE CORPORATE TRUSTEE, REGIONS BANK, HAS A WRITTEN CONFLICT OF INTEREST
POLICY. KEY EMPLOYEES OF THE CORPORATE TRUSTEE THAT ADMINISTER THE TRUST
ARE REQUIRED TO DISCLOSE ANNUALLY INTERESTS THAT GIVE RISE TO CONFLICTS.
THE CORPORATE TRUSTEE REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES
COMPLIANCE WITH THE POLICY THROUGH MANAGEMENT REVIEWS AND CORPORATE AUDITS.

FORM 990, PART VI, SECTION B, LINE 15A:

EXPLANATION: THE COMPENSATION THAT IS PAID TO THE ORGANIZATION'S TRUSTEE
ARE SCHEDULED FEES THAT ARE BASED ON MARKET VALUE.

FORM 990, PART VI, SECTION C, LINE 19:

EXPLANATION: THE TRUST MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL
STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2013)

332211
09-04-13

Name of the organization	HOLY NAME OF JESUS HOSPITAL TRUST C/O REGIONS BANK - TRUST DEPT.	Employer identification number 63-6117334
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FORM 990, PART IX, LINE 11G, OTHER FEES:

CONSULTING FEES :

PROGRAM SERVICE EXPENSES 203,021.

MANAGEMENT AND GENERAL EXPENSES 0.

FUNDRAISING EXPENSES 0.

TOTAL EXPENSES 203,021.

TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 203,021.

FORM 990, PART VI, SECTION B, LINE 13

EXPLANATION: THE TRUST DOES NOT HAVE A WRITTEN WHISTLEBLOWER POLICY,
BUT THE CORPORATE TRUSTEE, REGIONS BANK, HAS A WRITTEN WHISTLEBLOWER
POLICY.

FORM 990, PART VI, SECTION B, LINE 14

EXPLANATION: THE TRUST DOES NOT HAVE A WRITTEN DOCUMENT RETENTION AND
DESTRUCTION POLICY, BUT THE CORPORATE TRUSTEE, REGIONS BANK, HAS A
WRITTEN RETENTION AND DESTRUCTION POLICY.

Holy Name of Jesus Hospital Trust
Form 990
63-6117334

Form 990, Page 2, Part III, Question 4a

As provided in the Holy Name of Jesus Trust Agreement, the Trust has historically benefited and enhanced medical services in the Holy Name of Jesus Hospital and medical services in the State of Alabama. The Trust has tried to improve medical services to the elderly, the handicapped, the disadvantaged, the sick and the poor sick by providing adequate housing to the elderly and by attracting physicians and medically related services to the Gadsden area. The Trust has provided loans at reasonable interest rates for the development of medical clinics, a not-for-profit ambulance service and development of physical facilities at the Holy Name of Jesus Medical Center. The Trust assisted in attracting approximately 60 physicians to economically depressed areas since 1980.

ADULT LIVING CENTERS

The trust has made investments in areas that would benefit the citizens of Alabama with hospital care, home health care, and elderly housing. The Trust has financed all of the following adult living centers for the elderly and was the builder/owner of all of the adult living centers built prior to 1996. The Trust sold all of its pre-1996 Centers to the Section 501(c)(3) organizations listed below:

<u>Year</u>	<u>Location</u>	<u>1 Bedroom</u>	<u>2 Bedroom</u>	<u>Total Units</u>	<u>Owner</u>
1986	Attalla	11		11	Attalla
1987	Attalla	12		12	Attalla
1988	Glencoe	12		12	Edgar
1990	Glencoe	12		12	Edgar
1991	Glencoe	12		12	Edgar
1993	Glencoe		8	8	Edgar
1995	Gadsden	4	8	12	C.H.
1996	Gadsden	12		12	C.H.
1997	Glencoe	4	8	12	Edgar
1997	Butler	8	4	12	Butler
1997	Scottsboro	6	6	12	Caldwell
2002	Attalla	12		12	Attalla
2002	Anniston	<u>44</u>	<u>12</u>	<u>56</u>	Wesley Park Ltd.
		149	46	195	

Estimated number of residents per completed living center (1.25 per unit): 244

NOTE: "Edgar" means Edgar Senior Care Foundation, a Section 501 (c)(3) organization
"C.H." means Covenant House, a Section 501(c)(3) organization
"Butler" means Butler Senior Care Foundation, a Section 501(c)(3) organization
"Caldwell" means Caldwell-Dawson Foundation, a Section 501(c)(3) organization

Holy Name of Jesus Hospital Trust

Form 990

63-6117334

Form 990, Page 2, Part III, Question 4a (Continued)

"Attalla" means Attalla Housing and Social Services, Inc., a Section 501(c)(3) organization

"Wesley Park Ltd." means Wesley Park – A Methodist Home for the Aging, Inc. a Section 501(c)(3) organization.

Approximately 244 elderly residents are housed in the adult living centers. Following the sale of the Holy Name of Jesus Medical Center (formerly known as The Holy Name of Jesus Hospital) in late 1991, the Trust concentrated on developing and improving housing for the elderly. The Trust redesigned its one-bedroom apartment plan to comply with the Americans with Disabilities Act. And the Trust has developed a model two bedroom apartment for the elderly. White Oak Management Corporation, a wholly owned subsidiary of the Trust, provided certain management services for the adult living centers until it was dissolved on December 6, 2006.

NOTE: Although the Trust no longer owns the facilities described above, it maintains a relationship with the owners and has provided some of them with supplemental financing as well as consultation services. The Trust also continues to consider financing elderly living centers as opportunities arise.

BOSNIAN REFUGEES

During the tax year ending June 30, 1999, the Trust initiated a program to aid the settlement of Bosnian refugees fleeing the turmoil in the Balkans. Thirty families (benefiting a total of 94 individuals) received loans from the trust to enable them to purchase their own homes in Mobile, Alabama. Under federal guidelines refugees are deemed to be under psychological stress and therefore their health is at risk. The families selected for these loans were recommended to the Trust by Catholic Social Services of Mobile, Alabama.

NOTE: Some of these loans are still outstanding. Some have been paid off. A few are delinquent.

POINT CLEAR – HOUSING IMPROVEMENT AID TO DESCENDANTS OF FORMER SLAVES

During the tax year ending June 30, 2001, the Trust initiated a new program to aid a group of individuals in Point Clear, Alabama who are direct descendants of former slaves. Due to societal influences and mores, this group of individuals has resided in the area for generations, most dwelling in substandard if not decrepit structures. The living conditions in which these individuals reside subject each one to obvious health risks. Several families received loans from the trust to enable them to renovate or even purchase new homes on that same land. The families selected for these loans were recommended to the Trust by Catholic Social Services of Mobile, Alabama.

NOTE: The default rate for these loans has been higher than expected. The Trust is still working with some of the borrowers who are having difficulty making payments.

Holy Name of Jesus Hospital Trust
Form 990
63-6117334

SPECIAL YEARS, INC. – ELDERLY DAYCARE FACILITY

During the tax year ending June 30, 2001, the Trust also provided financial assistance in the way of a loan to an elderly daycare facility called Special Years, Inc. located in Selma, Alabama. The loan was used to renovate a house that will be used to provide daycare services for elderly adults

between 6:00 am to midnight daily. Special Years, Inc. is operated by Yvonne Hatcher who is a registered nurse. This program was recommended to the trust by the Director of Catholic Social Services in Mobile, Alabama.

NOTE: This facility is still serving elderly adults. The loan is still outstanding.

WESLEY PARK – HOUSING FOR THE ELDERLY

During the tax year ending June 30, 2002, the Trust participated in financing the construction of the Wesley Park project with another financial institution. Following completion of construction the project received the proceeds of a tax credit lending program which paid down a large portion of Wesley Park's construction debt on February 18, 2005. The remainder of Trust's portion of the unpaid construction loan was converted to a term loan for this project.

NOTE: This assisted living and continued care community is operating successfully. The term loan is still outstanding.

RAINBOW OMEGA, INC. – FINANCING FOR EQUIPMENT FOR VOCATIONAL CENTER

During the tax year ending June 30, 2011, the Trust provided financing for equipment to be used in the New Vocational Center being constructed by Rainbow Omega, Inc., a 501(c) (3) organization that benefits individuals with physical and/or mental disabilities. Amounts are still being advanced. Upon completion of the construction, the advances and any unpaid interest will be converted to a term loan.

NOTE: Construction has been completed and the construction loan has been converted to a term loan. Payments on this loan are current.

HEALS, INC. – DENTAL CLINIC FOR CHILDREN IN POVERTY

During the tax year ending June 30, 2012, the Trust provided \$30,000 to HEALS, Inc., an Alabama nonprofit corporation, to assist in funding construction costs to renovate a trailer for use as a pediatric dental clinic at Madison Crossroads School in Toney, Alabama. This dental clinic is located in an impoverished area of Madison County, geographically isolated from access to medical and dental care. HEALS, Inc. is a nonprofit, tax exempt organization (Section 501(c)(3)), that provides school-based health care, both medical and dental as an essential strategy for improving the health of children in poverty in order to optimize their general well-being and opportunities for success in life, in school, and in society.

NOTE: The dental clinic is providing pediatric dental care to children in poverty.

Holy Name of Jesus Hospital Trust
Form 990
63-6117334

THE ARC OF MADISON COUNTY – SHELTERED LOCATION FOR INTELLECTUALLY CHALLENGED ADULTS

During the tax year ending June 30, 2013, the Trust provided \$65,000 to The Arc of Madison County, a non-profit, 501(c)(3) organization to be used for expanding existing health care services to intellectually challenged individuals by developing a storage facility component which will provide meaningful sheltered vocational activity for this population.

NOTE: The Arc provides day care services in three locations to adults with intellectual disabilities Monday through Friday from 8:00am – 2:30pm. These services include educational, vocational, and adaptive daily living skills training and support for our clients. Therapy services are also provided as needed

BENEDICTINE SISTERS OF CULLMAN, AL, INC. – ADA COMPLIANT BATHROOMS IN THE INFIRMARY AREA

During the tax year ending June 30, 2013, the Trust provided \$100,000 to the Benedictine Sisters of Cullman, AL, Inc., a non-profit, 501(c)(3) organization to be used for the installation of ADA compliant bathrooms in the infirmary area of Ottilia Hall at the Sacred Heart Monastery as part of a major updating of the building that was constructed in 1904.

NOTE: Many persons with disabilities as well as persons needing nursing care and/or assistance with daily living and health care needs will be aided by these improvements.

CASA OF MADISON COUNTY – WHEELCHAIR RAMPS FOR ELDERLY AND HOMEBOUND

During the tax year ending June 30, 2014, the Trust provided \$30,000 to CASA of Madison County, a non-profit, 501(c)(3) organization to be used for building, repairing or repainting wheelchair ramps (and for purchasing portable ramps for temporary use pending completion of permanent ramps) for homebound citizens. Ramps are provided at no cost to qualified wheelchair bound clients. Labor for construction of the wheelchair ramps was provided for elderly and homebound clients by community volunteers. During the fiscal year ended June 30, 2013, CASA volunteers built 78 ramps, repaired 77 ramps, and re-painted 156 ramps. The new grant to CASA will allow it to continue this program.

JUDSON COLLEGE NURSING PROGRAM – NURSING LOANS FOR STUDENTS WHO INTEND TO PRACTICE NURSING IN RURAL OR MEDICALLY UNDERSERVED AREAS OF ALABAMA

During the tax year ending June 30, 2014, the Trust provided \$992,013 to Judson College, a non-profit, 501(c)(3) educational organization to be used for the Associate Degree in Nursing Program, now completing its third year. Judson College draws nursing students primarily from rural areas of Alabama, many of whom expect to serve in rural or medically underserved areas. Previously the Trust has provided for loans to student nurses who qualified for federal financial aid using FAFSA criteria. These student nursing loans are made to students who intend to practice nursing in rural or medically underserved areas of Alabama. The loans may be repaid in cash or in qualified nursing service in Alabama.

Holy Name of Jesus Hospital Trust
Form 990
63-6117334

ST. MARK THE EVANGELIST CATHOLIC CHURCH, GREENE COUNTY, ALABAMA

During the tax year ending June 30, 2014, the Trust provided \$5,000.00 to St Marks as a pilot project for the Greene County Mission Project (administered by St Marks) to provide wheel chair ramps and improve substandard housing for the elderly and home bound.

CONSULTING AGREEMENT

In the tax year ending June 30, 1995, the Trust entered into a Consulting Agreement with the Missionary Servants of the Most Blessed Trinity to provide additional guidance and assistance in (a) fulfilling the purposes of the Trust and (b) determining eligibility of participants in Trust projects.

CONTINUING REVIEW

The Sister Consultant meets regularly with the Trust Officer responsible for administering the Trust to review existing projects and to consider new projects. The Trust continuously searches for and evaluates potential projects to benefit and enhance medical services in the State of Alabama.

Projects under consideration as of this time include a wellness program (which may include provisions for ramps for the disabled and prescription drugs for people in poverty) being developed by Sowing Seeds of Hope (a non-profit, 501(c)(3) charitable organization) in Perry County, Alabama.

Because of the current economic situation, many tax-exempt organizations have been hampered in their financial ability to undertake projects like those that have received low-interest rate loans in the past from the Trust. The Trust, therefore, is considering other options to benefit and enhance medical services in the State of Alabama.

Holy Name of Jesus Hospital Trust
Form 990
63-6117334

Form 990, Page 8, Part VII, Section B, Question 1

Donald R. Garris Compensation

Consultant Fee

167,020.76

Deferred Compensation

17,500.00

184,520.76

Court Settlement

In 1991 First Alabama Bank (now known as Regions Bank), as Trustee of the Holy Name of Jesus Hospital Trust, filed a Request for Instructions in the Circuit Court of Etowah County, Alabama, In Equity (Civil Action No. CV 91-843-DWS). The Request for Instructions sought guidance on certain issues that arose following the sale of the Holy Name of Jesus Medical Center, a hospital owned and operated by the Holy Name of Jesus Medical Center, Inc. A Final Order in the case was entered on October 5, 1994, implementing a settlement agreement.

As part of the settlement agreement, the Trustee accepted responsibility for an annuity contract entered into by and between the Holy Name of Jesus Medical Center, Inc., an Alabama corporation, and Donald R. Garris, a former employee of the Holy Name of Jesus Medical Center, Inc. During the tax year ending June 30, 1995, the Trustee began making payments to Mr. Garris pursuant to the annuity contract. The Trust gives a Form 1099 to Mr. Garris with reference to these payments.

The Trust is carrying this annuity contract on its books as a liability. As each annuity payment is made, the liability decreases by the same amount as the payment. The liability is shown on Form 990, Part X, at Line 25.

The annuity contract is related to services performed by Mr. Garris on behalf of the Holy Name of Jesus Medical Center (a hospital formerly known as the Holy Name of Jesus Hospital). Mr. Garris' services benefited and enhanced medical services for the Holy Name of Jesus Hospital and medical services in the State of Alabama, which are the purposes of the Holy Name of Jesus Hospital Trust. The Holy Name of Jesus Medical Center, Inc. is an organization recognized by the IRS as being described in Section 501(c)(3).

Holy Name of Jesus Hospital Trust

Form 990

EIN 63-6117334

FYE 6/30/2014

Part I, Line 9 Program Service Revenue
Part VIII, Line 2 Program Service Revenue
(g) Mortgages

	<u>Mortgage Interest</u>
1 Attalla Housing Authority 6% 4-1-09	\$ 7,168 45
2 Attalla Housing & Social Svcs 6% 3/1/22	5,022 41
3 Bilbo, Mary	444 61
4 Butler Cares, Inc	1,375 32
5 Caldwell-Dawson Living Center	7,116 73
6 Covenant House Senior Care 7 65% 10/01/17	4,044 84
7 Covenant House Senior Care 8% 11/01/17	2,995 39
8 Doan, Hue 6% (formerly Jakupovik)	1,173 88
9 Juric-Vidic, Stefica	100 00
10 Missionary Servants	87,942 20
11 Rainbow Omega Project	8,485.68
12 Wesley Park, Ltd	32,921 19
	<u>\$ 158,790 70</u>

Holy Name of Jesus Hospital Trust
Form 990
EI 63-6117334
FYE 6/30/2014

Part VIII, Line 3, Investment Income

	<u>Money Market</u>	<u>Sub-Acct</u>	<u>Totals</u>
July	\$ 13.19	\$ 2.47	\$ 15.66
August	17.59	2.55	20.14
September	20.59	2.55	23.14
October	20.18	2.47	22.65
November	25.53	2.55	28.08
December	15.05	2.47	17.52
January	9.56	2.55	12.11
February	9.63	2.67	12.30
March	10.69	2.43	13.12
April	13.44	2.70	16.14
May	5.75	2.61	8.36
June	6.74	2.70	9.44
	<u>\$ 167.94</u>	<u>\$ 30.72</u>	<u>\$ 198.66</u>

U. S. Government Interest

July	\$ 4,989.92
August	17,164.55
September	4,181.87
October	-
November	19,049.66
December	-
January	-
February	17,098.40
March	2,522.38
April	2,625.00
May	19,835.32
June	-
	<u>\$ 87,467.10</u>

Holy Name of Jesus Hospital Trust

Form 990

EI 63-6117334

FYE 6/30/2014

Part VIII, Line 3, Investment Income

Corporate Bond Interest

	<u>Interest Income</u>
American Express Credit Corp	\$ 783 83
Apple	1,180.56
Barclays Bank	6,113 01
Caterpillar Financial Svcs	12,566 04
Chevron Corp	2,312 91
Cisco Systems	3,433 92
Citigroup	(500 00)
Credit Suisse USA	4,856 34
Federal Farm Credit Bank	324 65
Federal Natl Mtg Assn	59,693.48
Federal Home Loan Mtg	24,427 19
General Electric Capital Corp	9,409 22
GNMA	1,464.44
Goldman Sachs Group	9,525 27
IBM Corp	8,744 09
Intel	6,532 66
Merrill Lynch	320 22
Morgan J P & Co	11,875 00
National Australia Bk	2,157 42
Oracle	9,255 98
Royal Bank of Canada	2,543 67
SBC Communications	12,011.76
Shell	8,047 41
Target	13,437 50
3M	563.42
Toyota Motor	6,404 52
Wachovia	3,839 59
Walt Disney	3,312 50
	<u>\$ 224,636 60</u>

Holy Name of Jesus Hospital Trust

Form 990

EI 63-6117334

FYE 6/30/2014

Part VIII, Line 3, Investment Income

**Dividend income
(Continued)**

3M	\$ 1,281.40
Accenture PLC	1,218.30
American Century	32,122.05
American Europacific	2,792.88
American Express	607.20
Anadarko Petroleum	446.85
Apple	1,944.65
Artisan Mid Cap	9,587.41
Artisan Intl Value	23,653.23
Baxter International	311.15
Blackrock	722.00
Cardinal Health	1,111.69
Chevron	2,216.50
Cisco Systems	922.60
Citigroup	59.25
CVS/Caremark Corporation	824.98
Danaher Corp Del	126.75
E M C Corp Mass	359.50
Eaton	735.00
Exxon Mobile Corp	1,793.55
Ford	1,217.50
Honeywell	786.75
Intel Corp	1,811.25
Intuit	270.10
Invesco	1,218.75
Ishares Core	24,101.13
Ishares MSCI Emerging Market	2,145.95
J P Morgan Chase & Co	2,059.60
Kimberly Clark Corp	1,618.65
Las Vegas Sands	335.00
Lowes	810.00
Lyondellbasell Industries	617.50
MFS Resh Intl	3,418.00
McDonalds	552.85

Holy Name of Jesus Hospital Trust

Form 990

EI 63-6117334

FYE 6/30/2014

Part VIII, Line 3, Investment Income

Dividend income

(Continued)

McKesson	368 00
Monsanto	334 07
Nextera Energy	1,620 44
Oppenheimer Main St	765 98
Oracle Corporation	654.00
PepsiCo	1,430.21
Phillip Morris International	2,167.25
Phillips 66	1,224 00
Pioneer Growth Fund A	3,400 72
Pioneer Select Mid Cap	12,024.15
Praxair	973 00
Proctor & Gamble	1,788 56
Prudential Financial	638 10
Qualcomm	959 70
Schlumberger	762 39
Starbucks	520 00
Stryker	494 40
Target Corp	918 05
Texas Instruments	1,534 00
Tiffany	442 00
TJX COS	364 11
Travelers	435 00
Union Pac	255 00
United Technologies	1,117 92
Vanguard	2,710.00
Verizon Communications	1,331 72
VISA	397 80
Wal Mart	1,226.00
Walt Disney	989.00
Waste Management	1,877 05
Wells Fargo	2,125 00
Xcel Energy	851 20
	<u>\$ 170,498 79</u>
Total Dividend and Interest Income from securities	<u>\$ 482,801 15</u>

Holy Name of Jesus Hospital Trust

EIN 63-6117334

FYE 6/30/2014

Part VIII, Line 7 Gain or Loss from Sale of Securities

Sale Date	Purchase Date	Description	Gross Sales Price	Cost or Other Basis	Net Gain or (Loss)
Various	07/23/03	GNMA #614559	\$ 8,377 11	\$ 8,659 83	\$ (282 72)
Various	04/18/11	Federal Home Loan Mtg Corp Pool 6/1/2023	61,422 29	65,309 16	(3,886 87)
Various	08/16/11	Federal National Mortgage Assn Pool 3/1/2026	66,155 86	67,778 74	(1,622 88)
Various	04/18/11	Federal National Mortgage Assn Pool 12/1/2023	51,544 21	54,950 96	(3,406 75)
07/01/13	01/29/08	Allergan Inc	34,591 94	20,119 62	14,472 32
07/01/13	01/29/08	Cisco Systems Inc	25,134 54	25,306 15	(171 61)
07/05/13	01/09/13	Walt Disney	3,482 53	2,823 10	659 43
07/15/13	10/30/07	Federal Home Loan Mortgage Corp	500,000 00	500,000 00	-
07/05/13	03/15/13	Ford Motor Company	2,485 67	2,021 99	463 68
07/15/13	01/25/05	Goldman Sachs Group Inc	250,000 00	250,000 00	-
07/05/13	01/09/13	Lowe's Companies Inc	2,551 76	2,111 39	440 37
07/05/13	02/09/12	MetLife Inc	1,412 14	1,130 32	281 82
07/05/13	01/09/13	Prudential Financial Inc	6,801 20	5,543 89	1,257 31
07/01/13	07/02/08	United States Treasury	350,000 00	350,000 00	-
07/05/13	01/09/13	Wells Fargo & Co	3,340 93	2,791 99	548 94
08/16/13	10/17/11	Broadcom Corp CL A	31,184 96	43,855 27	(12,670 31)
07/31/13	02/09/12	MetLife Inc	26,707 64	20,677 24	6,030 40
07/31/13	12/17/08	Prudential Financial Inc	26,888 25	10,860 54	16,027 71
07/30/13	01/29/08	Stryker Corp	25,350 75	24,952 61	398 14
07/31/13	01/29/08	Travelers Companies Inc	22,970 97	15,216 43	7,754 54
10/03/13	11/07/12	Apple Inc	7,252 22	8,430 50	(1,178 28)
10/17/13	01/19/12	Baxter International Inc	22,538 72	17,825 35	4,713 37
10/01/13	05/20/09	Walt Disney	252,045 00	251,345 08	699 92
10/18/13	05/18/09	Federal Home Loan Bank	500,000 00	500,000 00	-
10/03/13	10/16/12	McDonalds Corp	19,437 78	19,233 10	204 68
10/03/13	07/02/09	Monsanto Co	43,646 32	33,529 43	10,116 89
10/03/13	01/29/08	Verizon	21,850 00	17,637 09	4,212 91
10/03/13	03/23/12	Xcel Energy Inc	41,438 58	40,460 17	978 41
12/13/13	02/21/08	Juniper Networks Inc	21,724 63	22,051 92	(327 29)
02/20/14	01/09/13	American Express Co	7,116 74	4,574 76	2,541 98
02/20/14	01/09/13	Cardinal Health Inc	16,074 57	9,594 98	6,479 59
02/17/14	05/20/09	Caterpillar Financial Svcs Corp	250,000 00	250,000 00	-
02/20/14	10/16/12	Chevron Corp	15,519 38	15,367 52	151 86
02/20/14	07/31/13	Walt Disney Co	11,871 07	9,673 28	2,197 79
02/20/14	07/01/13	Express Scripts Holding Co	3,836 44	3,101 99	734 45
02/20/14	05/17/13	Exxon Mobil Corp	19,593 56	18,808 73	784 83
02/20/14	10/16/12	McDonalds Corp	23,962 06	23,205 40	756 66
02/20/14	02/05/09	Philip Morris International Inc	67,854 31	48,372 99	19,481 32
02/20/14	03/23/12	Target Corp	41,029 06	42,589 69	(1,560 63)
02/15/14	03/24/04	United States Treasury	400,000 00	400,000 00	-
03/27/14	01/29/08	Travelers Companies Inc	24,301 54	13,408 56	10,892 98
04/23/14	03/24/14	Anadarko Petroleum Corp	7,439 12	6,226 32	1,212 80
04/17/14	08/17/10	Federal Farm Credit Bank	380,000 00	380,000 00	-
04/23/14	10/16/12	Lowe's Companies Inc	52,532 39	36,713 40	15,818 99
04/23/14	05/17/13	McKesson Corp	12,811 25	8,771 24	4,040 01
04/23/14	03/05/13	Phillips 66	8,251 21	6,561 08	1,690 13
Total Gain/Loss			<u>\$ 3,772,528 70</u>	<u>\$ 3,661,591 81</u>	<u>\$ 110,936 89</u>

Holy Name of Jesus Hospital Trust
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Part IX, Professional Fees
Lines 11b & 11c

	Line 11c, Accounting Fees	Line 11b, Legal Fees
July	\$ 300.00	\$ 231.00
August	2,939.00	-
September	300.00	1,125.00
October	532.00	843.75
November	729 00	-
December	300.00	854 23
January	300.00	-
February	555.00	750.00
March	300.00	-
April	300.00	-
May	300.00	-
June	300 00	651 00
	<u>\$ 7,155.00</u>	<u>\$ 4,454.98</u>

Accounting fees paid to: Barfield, Murphy, Shank, & Smith P.C

Legal fees paid to: Burr & Forman LLP
and Sirote and Permutt PC

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Part X, Line 2

Savings and temporary cash investments

Trust Money Market Deposit Fund - Main Account	\$ 835,218.83
Trust Money Market Deposit Fund - Sub Account	<u>317,445.38</u>

SAVINGS AND TEMPORARY CASH INVESTMENTS	<u><u>\$ 1,152,664.21</u></u>
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Holy Name of Jesus Hospital Trust

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Part X, Line 7, Other notes and loans receivable

	<u>Cost</u>
1 Attalla Housing Authority 3.5% (Dated 3/31/99)	\$ 208,436.43
2 Attalla Housing & Social Svc 3.5% (Dated 6/28/01)	146,070.32
3 Bilbo, Mary 6%	9,722.39
4 Butler Cares, Inc. 8%	39,765.17
5 Caldwell-Dawson Living Center 8%	127,879.93
6 Covenant House Senior Care 3% 6/1/2020 (97)	114,273.90
7 Covenant House Senior Care 3% 6/1/2020 (96)	84,625.30
8 Doan, Hue 6% (formerly Jakupovik note)	24,142.20
9 Hatcher, Yvonne 5%	52,506.87
10 Juric-Vidic, Stefica 5%	74,470.91
11 Missionary Servants	4,397,110.28
12 Rainbow Omega, Inc.	303,060.78
13 Wesley Park, LTD	434,230.97
	<u><u>\$ 6,016,295.45</u></u>

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Part X, Line 11 Investments - securities

Purchase Date	Quantity	Description	Value Method	Corporate Stocks	Preferred Stocks	Corporate Bonds	Other Securities	Non-Govt Securities
Non - Government Securities								
11/07/13	250,000	American Express Credit Corp	Cost			252,966 40		252,966 40
11/07/13	250,000	Apple Inc	Cost			243,675 00		243,675 00
11/29/10	250,000	Barclays Bank PLC 4/7/2015	Cost			253 724 98		253 724 98
04/08/13	250,000	Chevron	Cost			251 599 63		251,599 63
04/08/13	250 000	Cisco Systems Inc	Cost			273 768 92		273 768 92
03/24/14	200,000	Citigroup Inc	Cost			200 818 00		200,818 00
07/12/12	225,000	Credit Suisse USA Inc	Cost			239 935 12		239,935 12
04/18/11	468,423	Federal Home Loan Mtg Corp Pool (FHLMT) 06/01/2023	Cost			127,693 50		127,693 50
10/30/07	400,000	Fed Natl Mtg Assn (FNMA) 10/15/2014	Cost			398 488 40		398,488 40
11/27/07	250,000	Fed Natl Mtg Assn (FNMA) 04/15/2015	Cost			232 811 35		232 811 35
05/18/09	250,000	Fed Natl Mtg Assn (FNMA) 4/15/2015	Cost			274,165 00		274,165 00
11/06/13	600,000	Fed Natl Mtg Assn (FNMA) 11/27/18	Cost			601,635 22		601,635 22
04/18/11	467,135	Fed Natl Mtg Assn Pool (FNMA) 12/1/2023	Cost			118,253 54		118,253 54
08/16/11	583,654	Fed Natl Mtg Assn Pool (FNMA) 3/1/2026	Cost			294,831 10		294,831 10
07/06/12	400,000	Federal Home Loan Bank 11/17/2017	Cost			455 733 61		455 733 61
04/08/13	250 000	General Electric Capital Corp 2/11/11	Cost			285 966 72		285 966 72
07/23/03	250,000	GNMA #614559 5%	Cost			25,236 57		25,236 57
11/07/13	250,000	Goldman Sachs Group Inc	Cost			305,036 10		305,036 10
04/08/13	250,000	Intel Corp 10/1/2021	Cost			264,647 66		264,647 66
01/06/10	200,000	International Business Machines	Cost			210 250 95		210,250 95
05/31/05	250,000	JP Morgan & Chase & Co	Cost			249 862 50		249 862 50
03/24/14	200,000	Merrill Lynch & Co	Cost			235 644 78		235 644 78
04/08/13	250,000	National Australia Bk-NY 8/7/2015	Cost			253,324 92		253,324 92
01/06/10	200,000	Oracle Corporation	Cost			210 064 88		210 064 88
04/08/13	250,000	Royal Bank of Canada 9/19/2017	Cost			251,731 17		251,731 17
03/05/08	250,000	SBC Communications Inc Callable	Cost			250 385 77		250,385 77
01/06/10	200,000	Shell Intl Fin Make Whole	Cost			207 643 65		207 643 65
11/29/07	250,000	Target Corp Callable 5.375%	Cost			247,677 50		247,677 50
11/07/13	250,000	3M Co	Cost			254,777 31		254,777 31
04/08/13	250,000	Toyota Motor Credit Corp Series	Cost			268,582 02		268,582 02
07/13/06	10,000	Ishares TR Lehman Add Bnd	Cost			977,823 00		977,823 00
04/08/13	250,000	Wachovia Corp 6/15/17	Cost			282 490 56		282 490 56
01/29/08	390	3M Co	Cost	29,650 46				29,650 46
01/09/13	40	3M Co	Cost	3,864 80				3,864 80
10/16/12	500	Accenture PLC - CL A	Cost	35,311 75				35,311 75
01/09/13	75	Accenture PLC - CL A	Cost	5,225 25				5,225 25
07/05/13	60	Accenture PLC Sedol	Cost	4,404 00				4,404 00
03/24/14	40	Accenture PLC Sedol	Cost	3,286 00				3,286 00
04/04/13	19,870	American Century Small Cap Value Inst CL	Cost	183 600 00				183 600 00
12/28/09	3,888	American Europacific Grth-F2	Cost	149,721 00				149,721 00
04/04/13	112	American Europacific Grth-F2	Cost	4 737 34				4 737 34
03/25/14	497	American Europacific Grth-F2	Cost	24,036 06				24 036 06
01/29/08	600	American Express Co	Cost	28 540 93				28 540 93
04/23/14	25	American Express Co	Cost	2 177 00				2 177 00
07/25/12	450	Anadarko Petroleum Corp	Cost	32,391 36				32,391 36
01/09/13	90	Anadarko Petroleum Corp	Cost	6,993 90				6,993 90
03/24/14	35	Anadarko Petroleum Corp	Cost	2,905 61				2,905 61
11/07/12	525	Apple Inc	Cost	42,152 52				42,152 52
12/26/12	70	Apple Inc	Cost	5 141 40				5 141 40
01/09/13	140	Apple Inc	Cost	10 445 00				10,445 00
02/08/13	105	Apple Inc	Cost	7,138 62				7,138 62
07/05/13	210	Apple Inc	Cost	12,532 80				12,532 80
04/23/14	70	Apple Inc	Cost	5,285 70				5,285 70
01/19/12	3,937	Arusan Fds Inc International Value FD Inv	Cost	101,800 00				101,800 00
04/04/13	4,569	Arusan Fds Inc International Value FD Inv	Cost	148,904 33				148,904 33
04/04/13	7 966	Arusan Fds Inc Mid Cap Value Fd Inv	Cost	188 960 00				188 960 00
08/16/13	650	Auto Desk Inc	Cost	23,373 87				23,373 87
02/24/11	90	Blackrock Inc	Cost	17,845 12				17 845 12
01/09/13	10	Blackrock Inc	Cost	2,148 10				2,148 10
01/19/12	715	Cardinal Health Inc	Cost	29,543 37				29 543 37
12/26/12	35	Cardinal Health Inc	Cost	1 465 80				1 465 80
04/23/14	50	Cardinal Health Inc	Cost	3,457 49				3,457 49
03/24/14	400	Celgene Corp	Cost	28,392 98				28,392 98
07/13/06	700	Chevron	Cost	17,058 60				17,058 60
12/26/12	25	Chevron	Cost	2,720 49				2,720 49
01/09/13	65	Chevron	Cost	7 117 50				7 117 50

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Holy Name of Jesus Hospital Trust

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Part X, Line 11 Investments - securities

Purchase Date	Quantity	Description	Value Method	Corporate Stocks	Preferred Stocks	Corporate Bonds	Other Securities	Non-Gov't Securities
12/17/08	300	CISCO Systems Inc	Cost	5,117.46				5,117.46
03/23/12	170	CISCO Systems Inc	Cost	5,159.83				5,159.83
01/09/13	530	CISCO Systems Inc	Cost	9,166.10				9,166.10
03/24/14	250	CISCO Systems Inc	Cost	5,417.07				5,417.07
05/22/13	475	Citigroup Inc RR	Cost	24,443.45				24,443.45
07/31/13	925	Citigroup Inc RR	Cost	48,110.36				48,110.36
02/20/14	225	Citigroup Inc RR	Cost	10,862.97				10,862.97
04/23/14	100	Citigroup Inc RR	Cost	4,820.50				4,820.50
12/13/13	450	Citrix System Inc	Cost	26,177.90				26,177.90
11/13/03	(205)	CVS Corp	Cost	12,939.52				12,939.52
	(100)	CVS Corp	Cost	(3,600.40)				(3,600.40)
12/17/08	1,030	CVS/Caremark Corporation	Cost	3,712.33				3,712.33
01/09/13	380	CVS/Caremark Corporation	Cost	5,025.99				5,025.99
03/23/12	325	Danaher Corp Del	Cost	17,735.70				17,735.70
12/26/12	275	Danaher Corp Del	Cost	15,358.73				15,358.73
01/09/13	90	Danaher Corp Del	Cost	5,375.69				5,375.69
03/24/14	60	Danaher Corp Del	Cost	4,473.60				4,473.60
01/29/08	155	E M C Corp Mass	Cost	2,522.72				2,522.72
12/17/08	570	E M C Corp Mass	Cost	6,080.87				6,080.87
01/09/13	140	E M C Corp Mass	Cost	3,376.80				3,376.80
03/24/14	135	E M C Corp Mass	Cost	3,781.34				3,781.34
02/20/14	750	Eaton Corp	Cost	54,751.58				54,751.58
04/23/14	525	Ecolab	Cost	56,225.77				56,225.77
07/01/13	325	Express Scripts Holding Co	Cost	20,162.97				20,162.97
10/03/13	375	Express Scripts Holding Co	Cost	23,208.72				23,208.72
04/23/14	75	Express Scripts Holding Co	Cost	5,331.74				5,331.74
07/13/06	350	Exxon Mobil Corp	Cost	14,988.75				14,988.75
08/27/10	50	Exxon Mobil Corp	Cost	2,976.50				2,976.50
01/09/13	70	Exxon Mobil Corp	Cost	6,155.10				6,155.10
05/17/13	75	Exxon Mobil Corp	Cost	6,881.24				6,881.24
03/15/13	1,500	Ford Motor Company	Cost	20,219.85				20,219.85
10/03/13	1,300	Ford Motor Company	Cost	22,128.21				22,128.21
02/20/14	700	Ford Motor Company	Cost	10,717.00				10,717.00
07/01/13	450	Gilead Sciences Inc	Cost	23,278.32				23,278.32
02/20/14	500	Gilead Sciences Inc	Cost	41,499.95				41,499.95
03/24/14	200	Gilead Sciences Inc	Cost	14,495.98				14,495.98
02/24/11	25	Google Inc CL A	Cost	7,572.25				7,572.25
02/24/11	25	Google Inc CL A (splitoff)	Cost	7,553.19				7,553.19
03/15/13	300	Honeywell International Inc	Cost	22,101.51				22,101.51
02/20/14	275	Honeywell International Inc	Cost	25,789.47				25,789.47
03/24/14	25	Honeywell International Inc	Cost	2,307.50				2,307.50
09/02/98	600	Intel Corp (Stock Split)	Cost	-				-
06/29/04	400	Intel Corp	Cost	19,078.13				19,078.13
01/29/08	460	Intel Corp	Cost	9,393.20				9,393.20
01/09/13	490	Intel Corp	Cost	10,461.45				10,461.45
03/24/14	250	Intel Corp	Cost	6,307.48				6,307.48
07/01/13	365	Intuit Inc	Cost	23,130.01				23,130.01
07/31/13	750	Invesco Ltd	Cost	24,341.17				24,341.17
10/17/13	750	Invesco Ltd	Cost	24,427.43				24,427.43
10/28/11	1,000	Ishares Msci Emerging Mkt In	Cost	39,730.00				39,730.00
01/23/12	500	Ishares Msci Emerging Mkt In	Cost	20,314.75				20,314.75
04/04/13	1,000	Ishares Msci Emerging Mkt In	Cost	41,709.50				41,709.50
01/29/08	660	J P Morgan Chase & Co	Cost	29,593.28				29,593.28
12/17/08	90	J P Morgan Chase & Co	Cost	2,662.20				2,662.20
12/26/12	425	J P Morgan Chase & Co	Cost	18,755.25				18,755.25
01/09/13	180	J P Morgan Chase & Co	Cost	8,164.71				8,164.71
04/23/14	120	J P Morgan Chase & Co	Cost	6,692.39				6,692.39
01/19/12	415	Kimberly Clark Corp	Cost	30,224.41				30,224.41
01/09/13	80	Kimberly Clark Corp	Cost	6,787.20				6,787.20
02/20/14	335	Las Vegas Sands Corp	Cost	27,097.55				27,097.55
10/03/13	325	Lyondellbasell Industries	Cost	24,095.43				24,095.43
05/17/13	325	McKesson Corp	Cost	38,008.68				38,008.68
12/28/09	10,414	MFS Resh Intl Fd Cl I	Cost	149,957.50				149,957.50
04/04/13	2,079	MFS Resh Intl Fd Cl I	Cost	34,048.17				34,048.17
08/27/10	475	Nextera Energy Inc	Cost	25,567.25				25,567.25
01/09/13	110	Nextera Energy, Inc	Cost	7,789.09				7,789.09

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Part V, Line 11 Investments - securities

Purchase Date	Quantity	Description	Value Method	Corporate Stocks	Preferred Stocks	Corporate Bonds	Other Securities	Non-Govt Securities
12/28/09	740	Oppenheimer Main St Small Cap Fd Cl Y	Cost	13,038.63				13,038.63
04/04/13	88	Oppenheimer Main St Small Cap Fd Cl Y	Cost	2,332.17				2,332.17
01/25/08	8,704	Oppenheimer-Y	Cost	161,552.00				161,552.00
05/12/08	467	Oppenheimer-Y	Cost	9,207.30				9,207.30
01/29/08	1,000	Oracle Corporation	Cost	20,580.00				20,580.00
01/09/13	200	Oracle Corporation	Cost	6,907.84				6,907.84
05/17/13	150	Oracle Corporation	Cost	5,246.92				5,246.92
03/24/14	50	Oracle Corporation	Cost	1,919.50				1,919.50
09/12/03	345	PepsiCo	Cost	14,952.89				14,952.89
12/17/08	155	PepsiCo	Cost	8,027.17				8,027.17
01/09/13	90	PepsiCo	Cost	6,296.39				6,296.39
03/24/14	60	PepsiCo	Cost	4,929.00				4,929.00
12/26/12	325	Phillips 66	Cost	16,766.75				16,766.75
01/09/13	80	Phillips 66	Cost	4,112.00				4,112.00
03/05/13	170	Phillips 66	Cost	11,153.84				11,153.84
07/05/13	125	Phillips 66	Cost	7,113.74				7,113.74
05/15/09	6,849	Pioneer Select Mid Cap Growth Fd Cl Y (exchanged 6/2013)	Cost	180,252.75				180,252.75
05/15/09	4,636	Pioneer Fundamental Growth Fund Cl A (exchanged 3/5/10)	Cost	64,311.80				64,311.80
11/26/10	122	Pioneer Fundamental Growth Fund Cl A	Cost	1,310.99				1,310.99
12/22/10	8	Pioneer Fundamental Growth Fund Cl A	Cost	89.44				89.44
11/30/11	128	Pioneer Fundamental Growth Fund Cl A	Cost	1,430.99				1,430.99
12/28/11	12	Pioneer Fundamental Growth Fund Cl A	Cost	145.33				145.33
11/28/12	39	Pioneer Fundamental Growth Fund Cl A	Cost	515.10				515.10
12/21/12	21	Pioneer Fundamental Growth Fund Cl A	Cost	277.40				277.40
11/26/13	190	Pioneer Fundamental Growth Fund Cl A	Cost	3,081.27				3,081.27
11/26/13	0	Pioneer Fundamental Growth Fund Cl A	Cost	5.96				5.96
12/24/13	19	Pioneer Fundamental Growth Fund Cl A	Cost	313.49				313.49
08/18/11	250	Praxair Inc	Cost	24,863.95				24,863.95
01/09/13	120	Praxair Inc	Cost	13,648.80				13,648.80
10/03/13	15	Praxair Inc	Cost	1,807.20				1,807.20
03/24/14	30	Praxair Inc	Cost	3,960.90				3,960.90
01/29/08	450	Procter & Gamble Co	Cost	29,766.69				29,766.69
12/17/08	70	Procter & Gamble Co	Cost	4,037.60				4,037.60
01/09/13	80	Procter & Gamble Co	Cost	5,514.40				5,514.40
10/03/13	25	Procter & Gamble Co	Cost	1,903.50				1,903.50
02/20/14	375	Procter & Gamble Co	Cost	29,366.25				29,366.25
03/24/14	50	Procter & Gamble Co	Cost	3,980.00				3,980.00
12/17/08	310	Prudential Financial Inc	Cost	7,959.13				7,959.13
04/23/14	40	Prudential Financial Inc	Cost	3,282.40				3,282.40
08/26/05	320	Qualcomm Inc	Cost	12,833.86				12,833.86
12/17/08	230	Qualcomm Inc	Cost	7,716.09				7,716.09
01/09/13	90	Qualcomm Inc	Cost	5,823.00				5,823.00
03/24/14	45	Qualcomm Inc	Cost	3,507.30				3,507.30
01/29/08	270	Schlumberger Ltd	Cost	21,730.01				21,730.01
12/17/08	230	Schlumberger Ltd	Cost	9,231.38				9,231.38
01/09/13	70	Schlumberger Ltd	Cost	5,062.40				5,062.40
08/16/13	325	Starbucks Corp	Cost	23,107.47				23,107.47
10/03/13	300	Starbucks Corp	Cost	23,105.97				23,105.97
02/20/14	100	Starbucks Corp	Cost	7,348.99				7,348.99
04/23/14	25	Starbucks Corp	Cost	1,769.25				1,769.25
01/29/08	70	Stryker Corp	Cost	4,851.90				4,851.90
12/17/08	170	Stryker Corp	Cost	6,789.49				6,789.49
01/09/13	110	Stryker Corp	Cost	6,448.19				6,448.19
03/25/11	865	Texas Instrs Inc	Cost	30,040.76				30,040.76
11/07/12	135	Texas Instrs Inc	Cost	3,955.43				3,955.43
01/09/13	300	Texas Instrs Inc	Cost	9,596.85				9,596.85
12/26/12	325	Tiffany & Co	Cost	18,565.82				18,565.82
05/17/13	475	TJX COS Inc	Cost	24,396.76				24,396.76
02/20/14	400	TJX COS Inc	Cost	24,035.96				24,035.96
04/23/14	25	TJX COS Inc	Cost	1,487.75				1,487.75
10/03/13	300	Union PAC Corp	Cost	23,356.48				23,356.48
01/28/05	50	United Technologies Corp	Cost	2,360.82				2,360.82
01/29/08	10	United Technologies Corp	Cost	720.85				720.85
12/17/08	190	United Technologies Corp	Cost	8,995.82				8,995.82
05/17/13	235	United Technologies Corp	Cost	22,891.23				22,891.23
04/04/13	2,500	Vanguard FTSE Emerging Markets	Cost	105,000.00				105,000.00
01/29/08	465	Verizon Communications	Cost	16,605.46				16,605.46
12/28/09	35	Verizon Communications	Cost	1,102.74				1,102.74
03/24/14	75	Verizon Communications	Cost	3,533.25				3,533.25
								Continued on next page
03/05/10	250	Visa Inc	Cost	22,005.50				22,005.50
01/09/13	10	Visa Inc	Cost	1,614.80				1,614.80
04/04/13	600	Wal Mart Stores Inc	Cost	45,743.70				45,743.70
10/03/13	40	Wal Mart Stores Inc	Cost	2,930.00				2,930.00
03/24/14	60	Wal Mart Stores Inc	Cost	4,609.20				4,609.20
12/26/12	685	Walt Disney Co	Cost	34,244.45				34,244.45
01/09/13	65	Walt Disney Co	Cost	3,336.40				3,336.40
07/31/13	250	Walt Disney Co	Cost	16,122.12				16,122.12
04/23/14	50	Walt Disney Co	Cost	3,963.41				3,963.41
01/19/12	900	Waste Management Inc	Cost	30,105.00				30,105.00

Holy Name of Jesus Hospital Trust

Form 990

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Part X, Line 11 Investments - securities

Purchase Date	Quantity	Description	Value Method	Corporate Stocks	Preferred Stocks	Corporate Bonds	Other Securities	Non-Gov't Securities
12/26/12	100	Waste Management Inc	Cost	3,381.99				3,381.99
01/09/13	210	Waste Management Inc	Cost	7,255.48				7,255.48
02/20/14	90	Waste Management Inc	Cost	3,700.65				3,700.65
03/24/14	50	Waste Management Inc	Cost	2,031.00				2,031.00
08/17/12	875	Wells Fargo & Co	Cost	29,730.05				29,730.05
10/16/12	625	Wells Fargo & Co	Cost	21,199.93				21,199.93
01/09/13	200	Wells Fargo & Co	Cost	6,979.98				6,979.98
				<u>\$ 3,755,955.93</u>	<u>\$ -</u>	<u>\$ 9,001,245.83</u>	<u>\$ -</u>	<u>\$ 12,757,201.76</u>

Government Securities

Description	Value Method	U S Government	Total Gov't Securities
05/31/05 250,000 US Treasury Notes - 5/15/15, 4.125%	Cost	245,171.70	245,171.70
05/18/06 100,000 US Treasury Notes - 5/15/16, 5.125%	Cost	92,238.09	92,238.09
07/06/12 150,000 US Treasury N/B - 5/15/16, 5.125%	Cost	176,326.17	176,326.17
09/18/06 500,000 US Treasury Notes - 8/15/16, 4.875%	Cost	500,527.51	500,527.51
05/15/07 100,000 US Treasury Notes - 11/15/15, 4.5%	Cost	89,827.85	89,827.85
01/19/12 150,000 US Treasury Notes - 5/15/15, 4.125%	Cost	160,656.61	160,656.61
12/11/08 150,000 US Treasury Notes - 11/15/15, 4.5%	Cost	146,512.93	146,512.93
01/19/12 150,000 US Treasury Notes - 11/15/15, 4.5%	Cost	172,570.31	172,570.31
11/05/13 200,000 US Treasury Notes - 11/15/15, 4.5%	Cost	216,953.12	216,953.12
03/24/14 600,000 US Treasury Notes - 4/30/17, 8.75%	Cost	597,750.00	597,750.00
12/11/08 250,000 US Treasury Notes - 5/15/18, 3.875%	Cost	251,523.99	251,523.99
01/19/12 150,000 US Treasury Notes - 5/15/18, 3.875%	Cost	175,160.16	175,160.16
07/06/12 100,000 US Treasury N/B - 5/15/18, 3.875%	Cost	117,468.75	117,468.75
08/17/10 375,000 US Treasury Notes - 9/30/14, 2.375%	Cost	377,289.48	377,289.48
04/08/13 600,000 US Treasury N/B - 9/30/17, 1.875%	Cost	621,838.53	621,838.53
11/05/13 1,000,000 US Treasury N/B - 9/30/17, 1.875%	Cost	103,351.56	103,351.56
07/18/11 250,000 US Treasury N/B - 5/15/16, 5.125%	Cost	263,875.73	263,875.73
		<u>\$ 4,309,042.49</u>	<u>\$ 4,309,042.49</u>

Total Securities

\$ 17,066,244.25

Holy Name of Jesus Hospital Trust

Form 990

EIN 63-6117334

FYE 6/30/2014

Part VII, Trustees

Regions Bank Trustee's Fees

July	\$ 16,348.67
August	16,284.09
September	16,162.29
October	16,293.20
November	16,454.40
December	16,323.54
January	16,318.94
February	16,222.34
March	16,356.72
April	16,322.09
May	16,149.88
June	16,264.24

\$ 195,500.40