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OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its instructions is at <u>www.irs.gov/form990pf</u>.

For	cale	ndar year 2014, or tax year beginning 01-0	01-2014	, an	d ending 1	2-31-2014	
		ındatıon			A Employer ide	entification numbe	er
		JNTER AND CONSTANCE D HUNTER LE FOUNDATION INC			20-2155550		
Num	ber and	I street (or P O box number if mail is not delivered to street address	() Room/suite		B Telephone nui	mber (see instruction	ıs)
		OVA RD K KRAUSE	, , , , , , , , , , , , , , , , , , , ,		(386) 671-1994		
Cıtı	or town	, state or province, country, and ZIP or foreign postal code			C If exemption	annlication is nending	g, check here 🕨 🗍
		ACH, FL 32174			C II exemption	application is penally	y, check here 📮 j
		по стори по					_
G C	neck a	Il that apply Initial return Initial return of a Amended return	former public charity	′		ganizations, check he	·
		Address change Name change				ganizations meeting k here and attach coi	
H C I	neck ty	/pe of organization Section 501(c)(3) exempt priva	ite foundation			ndation status was to 507(b)(1)(A), chec	
Γ_{s}	ection	4947(a)(1) nonexempt charitable trust Other taxa			under section	1 307(b)(1)(1), chee	K Here
		ket value of all assets at end J Accounting method	l ✓ Cash I Accr	ual		tion is in a 60-month i 507(b)(1)(B), chec	_
		from Part II, col. (c), \$ 30,847,691	be on cash basis.)		under section	1 307(b)(1)(b), cliec	K liele F J
_	TE T	Analysis of Revenue and Expenses (The					(d) Disbursements
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(a) Revenue and expenses per books	(b) N	et investment income	(c) Adjusted net income	for chantable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach					
		schedule)	20,749,120				
	2	Check F If the foundation is not required to attach					
		Sch B					
	3	Interest on savings and temporary cash investments	9,421		9,421	9,421	
Revenue	4	Dividends and interest from securities	219,855		219,855	219,855	
	5a	Gross rents					
dh	b	Net rental income or (loss)	3,336,410				
ξ	6a	Net gain or (loss) from sale of assets not on line 10	3,330,410				
	Ь	Gross sales price for all assets on line 6a 26,963,390					
	7	Capital gain net income (from Part IV, line 2)			3,336,410		
	8	Net short-term capital gain				315,617	
	9	Income modifications					
	10a	Gross sales less returns and					
	ь	allowances Less Cost of goods sold					
	c	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	24,314,806		3,565,686	544,893	
	13	Compensation of officers, directors, trustees, etc	15,000		1,500		13,500
	14	Other employee salaries and wages					
Š.	15	Pension plans, employee benefits					
Expenses	16a	l l	1,621				1,621
Ä		.	3,275		325		2,950
<u>-</u>	1	` ` ` ' \	71,969		71,969		
rati	17	Interest	% 61				61
돌	18 19	Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion	<u>- 159</u>				
ЩЩ	20	Occupancy					
₽ď	21	Travel, conferences, and meetings	10,178				10,178
and Administrative	22	Printing and publications	135				135
	23	- · ·	% 8,043		2,485		5,558
Operating	24	Total operating and administrative expenses.					
Ψ		Add lines 13 through 23	110,282		76,279		34,003
Ĉ	25	Contributions, gifts, grants paid	603,200				603,200
	26	Total expenses and disbursements. Add lines 24 and					
		Subtract line 36 from line 12	713,482		76,279		637,203
	27	Subtract line 26 from line 12 Excess of revenue over expenses and disbursements	23,601,324				
	a b	Net investment income (if negative, enter -0-)	25,001,524		3,489,407		
	c	Adjusted net income (if negative, enter -0-)			,,	544,893	

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year (a) Book Value	(b) Bo	End of ok Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	(a) book value	(0) 600	K value	(c) Fall Market Value
	2	Savings and temporary cash investments	301,464		26,458,024	26,458,024
	3	Accounts receivable •				
	,	Less allowance for doubtful accounts				
	4	Pledges receivable				
	4	Less allowance for doubtful accounts				
	_					
	5					
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule)				
		Less allowance for doubtful accounts -				
sets	8	Inventories for sale or use				
wΙ	9	Prepaid expenses and deferred charges				
	10a	Investments—U S and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)	5,128,225	%)	3,698,984	4,376,001
	C	Investments—corporate bonds (attach schedule)	794,794		15,000	13,666
	11	Investments—land, buildings, and equipment basis ▶				
		Less accumulated depreciation (attach schedule) -				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)	284,736			
	14	Land, buildings, and equipment basis 🟲				
		Less accumulated depreciation (attach schedule) -				
	15	Other assets (describe 🟲)				
	16	Total assets (to be completed by all filers—see the				
		ınstructions Also, see page 1, item I)	6,509,219		30,172,008	30,847,691
	17	Accounts payable and accrued expenses				_
	18	Grants payable				
<u>ĕ</u>	19	Deferred revenue				
bilities	20	Loans from officers, directors, trustees, and other disqualified persons				
萺	21	Mortgages and other notes payable (attach schedule)				
_	22	Other liabilities (describe				
	23	Total liabilities (add lines 17 through 22)			0	
		Foundations that follow SFAS 117, check here 🕨 🔽				
ě		and complete lines 24 through 26 and lines 30 and 31.				
핅	24	Unrestricted	6,509,219		30,172,008	
Fund Balance	25	Temporarily restricted				
۳I	26	Permanently restricted				
딃		Foundations that do not follow SFAS 117, check here				
5		and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds				
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund				
Ą	29	Retained earnings, accumulated income, endowment, or other funds				
₹	30	Total net assets or fund balances (see instructions)	6,509,219		30,172,008	
2	31	Total liabilities and net assets/fund balances (see instructions)	6,509,219		30,172,008	
Do.	7311		0,000,210		30,11,2,000	
			(a) line 30 (aro c	$\overline{}$	
1		Total net assets or fund balances at beginning of year—Part II, column (-		6 500 310
2		with end-of-year figure reported on prior year's return)			1 2	6,509,219
2		Enter amount from Part I, line 27a		 1930	. 2	23,601,324
3		Other increases not included in line 2 (itemize)			. 4	61,465
4		Add lines 1, 2, and 3				30,172,008
5		Decreases not included in line 2 (itemize)			5	
6		Total net assets or fund balances at end of year (line 4 minus line 5)—P	arc 11, column (b), li	пе зи	. 6	30,172,008

the Part VI instructions

Part IV Capital Gains	and Losses for Tax on Inve	stment Income	e		
	e the kınd(s) of property sold (e g , re house, or common stock, 200 shs M		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a					
	(f) Depreciation allowe	d (a) Cos	t or other basis	(b) Gain	or (loss)
(e) Gross sales price	(or allowable)	1	cpense of sale) minus (g)
a					
b					
С					
d					
e					
Complete only for assets	s showing gain in column (h) and owne	· · ·			(h) gain minus
(i) F M V as of 12/31/69	9 (j) Adjusted basis as of 12/31/69		cess of col (1) col (j), ıf any	1 '''	less than -0-) or om col (h))
a	ds 01 12/31/05	over (cor (j), ii airy	200000 (11	
b					
с					
d					
e					
	ſ	If gain, also enter	ın Part I, line 7 Ì	1 1	
2 Capital gain net inc	ome or (net capital loss)	If (loss), enter -0-		2	3,336,410
3 Net short-term capi	ن Ital gain or (loss) as defined in sectio	ns 1222(5) and (6	,	- +	-,,
	n Part I, line 8, column (c) (see instru				
	• • • • • • • •			3	315,617
Part V Qualification	Under Section 4940(e) for R	reduced Tax or	Net Investme		313,017
	private foundations subject to the se				
i or optional use by domestic	private loundations subject to the se	ection 4 540(a) tax	on het mvestment	income)	
f section 4940(d)(2) applies	, leave this part blank				
	the section 4942 tax on the distribute			eriod?	┌ Yes ┌ No
f "Yes," the foundation does	not qualify under section 4940(e) Do	o not complete this	part		
1 Enter the appropriate am	ount in each column for each year, s	ee instructions bef	ore making any ent	ries	
(a) Base period years Calendar	(b)	(c)		(d) Distribution	n ratio
year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncha	rıtable-use assets	(col (b) divided	
2013	408,000		7,724,697		0 05282
2012	405,717		7,300,992		0 05557
2011	237,108		2,980,170		0 07956
2010	172,000		1,830,975		0 09394
		l	1,641,109	2	0 09567 0 37756
·	n ratio for the 5-year base period—div		_		0 3//56
the number of years	the foundation has been in existence	e ıf less than 5 yea	rs	3	0 07551
	of noncharitable-use assets for 2014	•	<u> </u>	4	11,141,553
	ne 3		<u> </u>	5	841,310
6 Enter 1% of net inv	estment income (1% of Part I, line 2	7b)		6	34,894
			_	7	876,204
8 Enter qualifying dis	tributions from Part XII, line 4			8	637,203

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See

	990-PF (2014) 1 VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst			age 4
		ructio	ns)	
1 a	on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary-see ; instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		6 9	9,788
	here Fand enter 1% of Part I, line 27b			
С	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			
3	Add lines 1 and 2		6 9	9,788
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		69	9,788
6	Credits/Payments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 31,181			
b	Exempt foreign organizations—tax withheld at source 6b			
c	Tax paid with application for extension of time to file (Form 8868) 6c 38,644			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d		69	9,825
8	Enter any penalty for underpayment of estimated tax. Check here 🔽 if Form 2220 is attached. 🕏 🔒			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid b			37
11	Enter the amount of line 10 to be Credited to 2015 estimated tax 37 Refunded 11			
	t VII-A Statements Regarding Activities		Yes	NI-
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	res	No No
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions	La		110
	for definition)?	1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.			
С	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers 🕨 \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		No
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	,		N.
45	of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> Did the foundation have unrelated business gross income of \$1,000 or more during the year?	3 4a		No No
4a b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		No
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		No
_	If "Yes," attach the statement required by General Instruction T.	H		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	 By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions 		[
	that conflict with the state law remain in the governing instrument?	 6	¦ 	No
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c),	⊢Ť		
	and Part XV.	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) FL			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney			
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation.	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)			
	or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)?			
	If "Yes," complete Part XIV	9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
	and addresses.	10		No

	Challenge and Department of Astroitics (continued)		<u>'</u>	age c
	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
40				INO
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had	4.5		
40	advisory privileges? If "Yes," attach statement (see instructions)	12	W = =	No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ► <u>N/A</u>			
14	The books are in care of ►KATHRYN F BECKS Telephone no ►(386)	671-	1994	
	Located at ▶800 S NOVA RD SUITE Q ORMOND BEACH FL ZIP+4 ▶32174			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			► F
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over		Yes	No
10	a bank, securities, or other financial account in a foreign country?	16	165	No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	10		140
	Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes Vo			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period			
_	after termination of government service, if terminating within 90 days) Yes ✓ No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			.
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		No
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,	_		
_	that were not corrected before the first day of the tax year beginning in 2014?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2014?			
L	If "Yes," list the years • 20, 20, 20, 20			
Ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	26		No
_	to all years listed, answer "No" and attach statement—see instructions)	2b		140
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
20	► 20, 20, 20, 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
За				
L	any time during the year?			
D				
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	If the foundation had excess business holdings in 2014.).	3b		No
4-				
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	-	No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		No
	- chartaple parpose that had not been removed from Jeopaidy before the hist day of the tax year bedining in 20147 - 7	, TU	1	110

	990-PF (2014)									Page 6
Pai	rt VIII-B Statements Rega	ardii	ng Activities for	W	nich Form 4720	May	Be Required (cont	inue	d)	
5a	During the year did the foundation	n pay	orincurany amoun	t to						
	(1) Carry on propaganda, or othe	rwise	attempt to influenc	e leg	ııslatıon (section 494	45(e))?	No		
	(2) Influence the outcome of any	-								
	on, directly or indirectly, any		=			•				
	(3) Provide a grant to an individu						┌ Yes ┌	No		
	(4) Provide a grant to an organiz							_		
	ın section 4945(d)(4)(A)? (s	No								
	(5) Provide for any purpose othe							_		
	educational purposes, or for									
b	If any answer is "Yes" to 5a(1)-			5b	No					
	Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?									
	Organizations relying on a currei									
С	If the answer is "Yes" to questio		**		· · · · · · · · · · · · · · · · · · ·			_		
	tax because it maintained expen					•	\ Yes \	No		
	If "Yes," attach the statement requ	ııred l	by Regulations section	n 53.	.4945–5(d).					
6a	Did the foundation, during the ye	ar, re	ceive any funds, dire	ectly	or indirectly, to pay	prei		_		
	a personal benefit contract?									
b	Did the foundation, during the ye	ar, pa	y premiums, directly	y or i	indirectly, on a perso	nal	benefit contract?		6b	No
	If "Yes" to 6b, file Form 8870.							_		
7a	At any time during the tax year,									
<u>b</u>	If yes, did the foundation receive								7b	No
Pai		t Of	ficers, Directors	s, T	rustees, Founda	tio	n Managers, Highly	Paid	Emp	loyees,
	and Contractors List all officers, directors, trustee	s fo	Indation managers	nd t	hair compansation (soo i	netructions)			
	List all officers, affectors, trustee		Title, and average		c) Compensation		(d) Contributions to	Ι		
	(a) Name and address	``	hours per week		If not paid, enter		mployee benefit plans			e account, wances
		+	evoted to position		-0-)		deferred compensation		ner and	wances
	n Clifton	V IC 6	e President		5,000					
	So Nova Rd Suite Q ond Beach,FL 32174	3 00	,							
Kathr	yn F Becks	_	sident		5,000					
	S Nova Rd Suite Q	5 00)							
	ond Beach, FL 32174 M Wadsworth		- D J t							
		1 V 1 C 6	e President)		5,000					
	So Nova Rd Suite Q IOND BEACH, FL 32174									
	Compensation of five highest-pai	d emp	oloyees (other than	thos	e included on line 1–	-see	instructions). If none, e	nter "I	NONE."	
			(b) Title, and aver	ane			(d) Contributions to			
(a)	Name and address of each emplo paid more than \$50,000	yee	hours per week		(c) Compensatio	n	employee benefit plans and deferred			e account, owances
	paid more than \$50,000		devoted to positi	on			compensation	"	ner and	owances
NON	IE						·			
			1							
			1							
			-							
			1							
Tota	I number of other employees paid	over	<u>.</u> \$50.000							

Part VIII Information About Officers, Directors, and Contractors (continued)	Trustees, Foundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional se	rvices (see instructions). If none, enter "NONE".	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
USTRUST	INVESTMENT ADVISORS	71,969
250 S PARK AVE SUITE 410 WINTER PARK, FL 32789		
Total number of others receiving over \$50,000 for professional ser	vices	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year Incorganizations and other beneficiaries served, conferences convened, research pap		Expenses
1UNIVERSITY OF FLORIDA SCHOOL OF LAW, ENDOWED SC	HOLARSHIPS	100,000
2 DAYTONA STATE COLLEGE 30 ESTIMATED SCHOLARSHI	PS	40,000
3UNIVERSITY OF CENTRAL FLORIDA FIRST GENERATION S	SCHOLARSHIPS	40,000
4FAMILY RENEW COMMUNITY INC FAMILY TRANSITIONAL	HOUSING AND SUPPORT	35,000
Part IX-B Summary of Program-Related Investme	ents (see instructions)	
Describe the two largest program-related investments made by the foundation		A mount
1		
		1
2		
		1
		1
All other program-related investments See instructions		
3		
_		1
		1
Total Add lines 1 through 2	<u> </u>	

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations. see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. 1 purposes 1a 9.746.894 1h 1.564.327 1c 1d 11.311.221 Reduction claimed for blockage or other factors reported on lines 1a and 1e 2 2 3 3 Subtract line 2 from line 1d. 11.311.221 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 169.668 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 5 11.141.553 5 557.078 **Distributable Amount** (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and Part XT certain foreign organizations check here $\blacktriangleright \Gamma$ and do not complete this part.) 557.078 1 Tax on investment income for 2014 from Part VI, line 5. 2a Income tax for 2014 (This does not include the tax from Part VI). . . 69.788 2c 3 3 487.290 4 4 5 5 487,290 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . 7 487,290 7 Part XII **Qualifying Distributions** (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1 Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. 1a 637.203 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. 2 2 3 Amounts set aside for specific charitable projects that satisfy the 3a 3b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 637,203 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 637,203 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

the section 4940(e) reduction of tax in those years

F	Undistributed Income (see instr	uctions)			
		(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
4	Distributable amount for 2014 from Part VI. line 7	Corpus	rears prior to 2013	2013	487,290
	Distributable amount for 2014 from Part XI, line 7				107,230
	Undistributed income, if any, as of the end of 2014 Enter amount for 2013 only				
	Total for prior years 20, 20, 20				
	Excess distributions carryover, if any, to 2014 From 2009				
	From 2010 80,451				
	From 2011				
	From 2012				
	From 2013				
_	Total of lines 3a through e	633,346			
	Qualifying distributions for 2014 from Part				
_	XII, line 4 🕨 \$ 637,203				
а	Applied to 2013, but not more than line 2a				
	Applied to undistributed income of prior years				
	(Election required—see instructions)				
C	Treated as distributions out of corpus (Election	0			
	required—see instructions)				
	Applied to 2014 distributable amount				487,290
	Remaining amount distributed out of corpus	149,913			
5	Excess distributions carryover applied to 2014				
	(If an amount appears in column (d), the				
-	same amount must be shown in column (a).) Enter the net total of each column as				
0	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	783,259			
	Prior years' undistributed income Subtract				
	line 4b from line 2b				
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable amount				
	—see instructions				
е	Undistributed income for 2013 Subtract line				
	4a from line 2a Taxable amount—see				
_	instructions				
T	Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must				
	be distributed in 2015				0
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election may				
	be required - see instructions)				
8	Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)	74,945			
9	Excess distributions carryover to 2015.				
_	Subtract lines 7 and 8 from line 6a	708,314			
10	Analysis of line 9				
а	Excess from 2010 80,451				
b	Excess from 2011				
C	Excess from 2012 221,763				
d	Excess from 2013 176,946				
е	Excess from 2014 149,913				

Check here F if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

- a The name, address, and telephone number or email address of the person to whom applications should be addressed
- b The form in which applications should be submitted and information and materials they should include
- c Any submission deadlines
- **d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

3 Grants and Contributions Paid		proved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year See Additional Data Table	or substantial contributor	recipient		
Total			▶ 3a	603,20
Total			▶ 3h	

Form 990-1						Page 12
	-A Analysis of Income-Produci			T		
Enter gross	s amounts unless otherwise indicated	(a)	usiness income (b)	Excluded by section (c)	1 512, 513, or 514 (d)	(e) Related or exempt function income
_	n service revenue	Business code	A mount	Exclusion code	A mount	(See instructions)
ь						
e						
	and contracts from government agencies					
3 Interes	rship dues and assessments st on savings and temporary cash ments			14	9,421	
	nds and interest from securities			14	219,855	
	financed property					
6 Net ren	ebt-financed property ntal income or (loss) from personal ty					
7 Otherı	nvestment income					
invento	r (loss) from sales of assets other than ory			18	3,336,410	
	ome or (loss) from special events profit or (loss) from sales of inventory					
	evenue a					
12 Subtota	al Add columns (b), (d), and (e).				3,565,686	
	Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify c			1	13	3,565,686
	-B Relationship of Activities to	the Accom				
Line No.	Explain below how each activity for which the accomplishment of the foundation's instructions)					

Par	τ ΧΛΤ						sactioi	ns and	Relationsnips	with			
		organization directly or i	ndırectly e	engage	ın any of	the following wi						Yes	No
	ganızat				. ,. ,			•					
a Tı	ransfer	s from the reporting four	ndation to	a nonc	harıtable	exempt organiz	ation of						
(1	l) Cas	h									1a(1)		No
(2	2) Oth	erassets									1a(2)		No
b 0	ther tra	ansactions											
(1	L) Sale	es of assets to a noncha	rıtable exe	empt or	ganızatıo	n					1b(1)		No
(2	2) Purc	chases of assets from a	noncharit	able ex	empt orga	anızatıon					1b(2)		No
(3	B) Rent	tal of facilities, equipme	nt, or othe	rasset	ts						1b(3)		No
(4	l) Rein	nbursement arrangemer	nts								1b(4)		No
(5) Loar	ns or loan guarantees.									1b(5)		No
(6) Perfo	ormance of services or n	nembershi	p or fur	ndraising	solicitations.					1b(6)		No
c Sl	haring	of facilities, equipment,	mailing lis	ts, oth	er assets,	, or paid employ	ees				1c		No
of	the go	ods, other assets, or se	rvices giv	en by t	he reporti	ng foundation	If the fou	ındation i	received less thai	n fair marke	et value		
(a) Li	ne No	(b) Amount involved	(c) Name	of nonch	narıtable exe	empt organization	(d)	Description	of transfers, transact	ions, and sha	rıng arra	ngemer	nts
	-												
de	escribe		ne Code (d schedule		an sectio	n 501(c)(3)) or	ın sectı					ıs F	No
Sigr	the info		nd belief,	ıt ıs tru	ie, correc					an taxpaye	r) is bas	sed on	all
Her		*****				2015-11-13	_ \	*****		return			
	<u> </u>	Signature of officer or t	rustee			Date	<u> </u>	Title		below (see inst	r)? <mark> ▼_1</mark>	′es ┌ N	No
		Print/Type preparer's Kathryn F Krause C		Prepa	rer's Sıgn	nature	Date		Check if self- employed ▶	PTIN P(00375	545	
Paid Pre _l Use	parer	Firm's name ► KATHRYN KRAUSE C	РА РА						Firm's EIN ▶				
Only		Firm's address ► 800 S NOVA RD STE 321747362	Q ORM	o a noncharitable exempt organization of la(1) No la(2) No xempt organization. lb(1) No itable exempt organization. lb(3) No lb(3) No lb(4) No lb(3) No lb(4) No lb(5) No lb(6) No sists, other assets, or paid employees. lc No "complete the following schedule Column (b) should always show the fair market value into shown in column (d) the value of the goods, other assets, or services received lee of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (d) Description of transfers, transactions, and sharing arrangements (b) Type of organization (c) Description of relationship (c) Description of relationship (c) Description of relationship (d) Description of relationship (e) Type of organization (f) Type of organization (g) Type of organization (g) Description of relationship (h) Type of organization (h) Type of org									

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

			• •	•
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
FAMILY RENEW COMMUNITYINC 105 SOUTH ST DAYTONA BEACH,FL 32114	NONE	PC	FAMILY SUPPORT HOUSING	35,000
MEMORIAL SLOAN-KETTERING CENTE P O BOX 27106 NEW YORK,NY 10087	NONE	PC	MEDICAL RESEARCH	10,000
CONKLIN CTR FOR THE BLIND 405 WHITE ST DAYTONA BEACH,FL 32114	NONE	PC	EDUCATION OF THE BLIND	10,000
PLANNED PARENTHOOD FED OF AMER 434 W 33RD ST NEW YORK,NY 10001	NONE	PC	EDUCATIONAL FAMILY SUPPORT	10,000
SALVATION ARMY FL DIV 1555 LPGA BLVD DAYTONA BEACH,FL 32117	NONE	PC	COMMUNITY SUPPORT	20,000
ART LEAGUE OF DAYTONA BEACH 433 SO PALMETTO AVE DAYTONA BEACH,FL 32114	NONE	PC	ARTS EDUCATIONAL	3,000
RONALD REAGAN PRESIDENTIAL LIBRARY 217 STATE STREET SANTA BARBARA,CA 93101	NONE	PC	UNITED STATES LIBRARY	10,000
YOUNG AMERICANS FOUNDATION 110 ELDEN STREET HERNDON,VA 20179	NONE	PC	YOUTH EDUCATION	10,000
AMERICAN RED CROSS 341 WHITE ST DAYTONA BEACH,FL 32114	NONE	PC	COMMUNITY SUPPORT	10,000
ORMOND MEMORIAL ART MUSEUM 78 E GRANADA ORMOND BEACH,FL 32176	NONE	PC	EDUCATIONAL MUSEUM	5,000
PONCE INLET LIGHTHOUSE PRESERVATION CITY HALL PONCE INLET,FL 32118	NONE	PC	HISTORIC PRESERVATION	5,000
HALIFAX HUMANE SOCIETY 2364 LPGA BLVD DAYTONA BEACH,FL 32114	NONE	PC	ANIMAL PROTECTION	10,000
THE ARC OF VOLUSIA COUNTY INC 100 JIMMY HUGER CIRCLE DAYTONA BEACH,FL 32117	NONE	PC	DISABILITY EDUCATION	15,000
ALZHEIMERS ASSOCIATION 225 N MICHIGAN AVE CHICAGO,IL 60601	NONE	PC	MEDICAL RESEARCH	5,000
HALIFAX URBAN MINISTRIES 215 BAY STREET DAYTONA BEACH,FL 32114	NONE	PC	FOOD BANK, FAMILY SUPPORT	20,000
Total				603,200

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
RODEHEAVER BOYS RANCH 380 BOYS RANCH RD PALAKA,FL 32177	NONE	PC	AT RISK YOUTH EDUCATION AND HOUSING	35,000
NEW HORIZONS SERVICE DOGS 1590 LAUREL PARK CT ORANGE CITY,FL 32763	NONE	PC	DISABILITY ASSISTANCE	5,000
HALIFAX HEALTH HOSPICE 3800 WOODBRIAR TRAIL PORT ORANGE,FL 32129	NONE	PC	MEDICAL SUPPORT	5,000
AMERICAN CANCER SOCIETY INC 250 WILLIAMS STREET NW ATLANTA,GA 30303	NONE	PC	MEDICAL RESEARCH	10,000
AUTISM SPEAKS INC 1 EAST 33RD ST 4TH FLOOR NEW YORK, NY 10016	NONE	PC	MEDICAL RESEARCH	5,000
AVENUES 12 INC 204 SOUTH STREET DAYTONA BEACH,FL 32114	NONE	PC	SHELTER AND EDUCATION PROGRAM ENTRY EXPENSES	25,000
DAYTONA STATE COLLEGE FOUNDATION IN 1200 WINTL SPEEDWAY BLVD DAYTONA BEACH,FL 32014	NONE	PC	SCHOLARSHIPS	40,000
EASTER SEAL SOCIETY OF VOLUSIA FLAG 1219 DUNN AVENUE DAYTONA BEACH,FL 32114	NONE	PC	EARLY INTERVENTION SCHOLARSHIPS	20,000
PEACE RIVER REFUGE RANCH INC 640 NE 170TH COURT SILVER SPRINGS,FL 34488	NONE	PC	ANIMAL PROTECTION	1,500
FRIENDS OF CANAVERALINC PO BOX 1526 NEW SMYRNA BEACH,FL 32170	NONE	PC	SEASHORE PRESERVATION	1,000
FUTURES INC 3750 OLSON DRIVE DAYTONA BEACH,FL 32124	NONE	PC	CHILDREN'S EDUCATION	20,000
HOMES FOR OUR TROOPS INC 6 MAIN STREET TAUNTON, MA 02780	NONE	PC	MILITARY SUPPORT	5,000
MARINE DISCOVERY CENTER INC 520 BARRACUDA BLVD NEW SMYRNA BEACH, FL 32169	NONE	PC	ENVIRONMENTAL PRESEVATION AND RESEARCH	34,400
OPERATION AMERICA STANDING IN SUPPO 2529 NORMA STREET TITUSVILLE,FL 32954	NONE	PC	MILITARY SUPPORT	500
PACE CENTER FOR GIRLS INC 1 W ADAMS ST SUITE 301 JACKSONVILLE,FL 32202	NONE	PC	AT RISK YOUTH EDUCATON	22,500
Total				603,200

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

TOTAL PROPERTY OF THE PROPERTY	anto una continuationo	· u.u Þug ·	ale real of Approved for i	acare rayment
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
,	or substantial contributor			
a Paid during the year				
RONALD MCDONALD HOUSE CHARITIES 1030 N ORANGE AVE STE 105 ORLANDO,FL 32801	NONE	PC	MEDICAL SUPPORT	25,000
FLORIDA INSTITUTE OF TECHNOLOGY 150 WUNIVERSITY BLVD MELBOURNE,FL 32901	NONE	PC	MEDICAL RESEARCHROBOTICS	5,000
SEABREEZE HIGH SCHOOL 2700 N OLEANDER AVE DAYTONA BEACH, FL 32118	NONE	PC	AUTISM EDUCATION	5,300
SMA BEHAVIORAL HEALTH SERVICES INC 1220 WILLIS AVE DAYTONA BEACH,FL 32114	NONE	PC	HEALTH ORGANIZATION	20,000
UNIVERSITY OF CENTRAL FLORIDA FOUND 12424 RESEARCH PARKWAY SUITE 250 ORLANDO,FL 32826	NONE	PC	SCHOLARSHIPS	40,000
UNIVERSITY OF FLORIDA FOUNDATION NC PO BOX 14425 GAINESVILLE,FL 32604	NONE	PC	LEGAL SCHOLARSHIPS	100,000
Total				603,200

TY 2014 Accounting Fees Schedule

Name: PAUL B HUNTER AND CONSTANCE D HUNTER

CHARITABLE FOUNDATION INC

EIN: 20-2155550

Software ID: 14000265

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Kathryn F Krause CPA	3,275	325	0	2,950

TY 2014 Investments Corporate Stock Schedule

Name: PAUL B HUNTER AND CONSTANCE D HUNTER

CHARITABLE FOUNDATION INC

EIN: 20-2155550

Software ID: 14000265

Name of Stock	End of Year Book Value	End of Year Fair Market Value
Publicly traded securities-PNC Bank	3,698,984	4,371,114
Publicly traded securities-U S Trust		4,887

TY 2014 Legal Fees Schedule

Name: PAUL B HUNTER AND CONSTANCE D HUNTER

CHARITABLE FOUNDATION INC

EIN: 20-2155550

Software ID: 14000265

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Kinsey Vincent Plye	121	0	0	121
Paralegal fee	1,500	0	0	1,500

TY 2014 Other Expenses Schedule

Name: PAUL B HUNTER AND CONSTANCE D HUNTER

CHARITABLE FOUNDATION INC

EIN: 20-2155550

Software ID: 14000265

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Bank Charges	126			126
Foreign taxes paid on dividends	1,955	1,955		
Grant management	5,432			5,432
Investment expense	26	26		
Stock miscellaneous costs	504	504		

TY 2014 Other Increases Schedule

Name: PAUL B HUNTER AND CONSTANCE D HUNTER

CHARITABLE FOUNDATION INC

EIN: 20-2155550

Software ID: 14000265

Description	Amount
Accrued income	4,399
Non dividend distributions	4,803
Other adjustments	13,466
Tax exempt income purchased prior year	38,797

TY 2014 Other Professional Fees Schedule

Name: PAUL B HUNTER AND CONSTANCE D HUNTER

CHARITABLE FOUNDATION INC

EIN: 20-2155550

Software ID: 14000265

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK FEE-BANK OF AMERICA	71,969	71,969	0	0

TY 2014 Reasonable Cause Explanation

Name: PAUL B HUNTER AND CONSTANCE D HUNTER

CHARITABLE FOUNDATION INC

EIN: 20-2155550

Software ID: 14000265

Software Version: 2014v5.0

Explanation: On Feb 23, 2014, the founder of the Foundation died. On May 16,

2015, the attorney and President of the Foundation died. On November 7, 2014 the Foundation received a one time, unusual bequest of \$ 20 million dollars from the founder's estate. Some of the securities received were not suitable for a private foundation.

To diversify and upgrade the foundation's investments, many securities were sold. This produced a one time, extraordinary, large capital gain. Due to this one time, unusual situation, we

respectfully request the waiving of any penalties.

TY 2014 Taxes Schedule

Name: PAUL B HUNTER AND CONSTANCE D HUNTER

CHARITABLE FOUNDATION INC

EIN: 20-2155550

Software ID: 14000265

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
State of Florida Annual Corporate Reg	61			61

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PAUL B HUNTER AND CONSTANCE D HUNTER

As Filed Data -

DLN: 93491317010775

OMB No 1545-0047

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

2014

Employer identification number

CHARITABLE FOUNDAT	TION INC	20-2155550
Organization type (chec	ck one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private	e foundation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private for	undation
	501(c)(3) taxable private foundation	
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, con om any one contributor Complete Parts I and II See instructions for dete	
. , .,	om any one contributor Complete Parts I and II See instructions for dete	ermining a contributor's total contributions
Special Rules		
under sections 50 received from any	on described in section $501(c)(3)$ filing Form 990 or 990-EZ that met the $9(a)(1)$ and $170(b)(1)(A)(vi)$, that checked Schedule A (Form 990 or 99 one contributor, during the year, total contributions of the greater of (1 r (ii) Form 990-EZ, line 1 Complete Parts I and II	90-EZ), Part II, line 13, 16a, or 16b, and that
during the year, to	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ otal contributions of more than \$1,000 <i>exclusively</i> for religious, charitab of cruelty to children or animals Complete Parts I, II, and III	
For an organizatio	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ	that received from any one contributor,

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

religious, charitable, etc., contributions totaling \$5,000 or more during the year.........

during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively*

Name of organization PAUL B HUNTER AND CONSTANCE D HUNTER CHARITABLE FOUNDATION INC

Employer identification number

20-2155550

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CONSTANCE D HUNTER TRUST 150 SO PALMETTO AVE BOX A DAYTONA BEACH, FL32114	\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization
PAUL B HUNTER AND CONSTANCE D HUNTER
CHARITABLE FOUNDATION INC

Employer identification number

20-2155550

Noncash Property (see instructions) Use duplicate copies of Part II if additional spaneeded	ce is	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
PUBLICALY TRADED STOCKS AND BONDS	\$ 20,749,120	2014-11-07
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	<u> </u>	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	Description of noncash property given (b) (b) Description of noncash property given	Description of noncash property given C FMV (or estimate)

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Page 4 Name of organization **Employer identification number** PAUL B HUNTER AND CONSTANCE D HUNTER CHARITABLE FOUNDATION INC 20-2155550 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once See instructions) Use duplicate copies of Part III if additional space is needed (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP 4 Relationship of transferor to transferee (a) No from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP 4 Relationship of transferor to transferee (a) No. (c) Use of gift from (b) Purpose of gift (d) Description of how gift is held Part I

(a) No. from Part I

Transferee's name, address, and ZIP 4

(b) Purpose of gift

(c) Use of gift

(d) Description of how gift is held

(e) Transfer of gift

(c) Use of gift

(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP 4

(e) Transfer of gift

Relationship of transferor to transferee