

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**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 separate instructions is at <a href="https://www.irs.gov/form990of">www.irs.gov/form990of</a>

OMB No 1545-0052
2014
Open to Public Inspectio

· ANT

For	calendar year 2014 or tax year beginning		, and ending		<del>_</del>
Na	me of foundation	A Employer identification	number		
	OMMUNITY HEALTH SYSTEMS	20-3323391			
	nber and street (or P O box number if mail is not delivered to street	Room/suite	B Telephone number		
	000 MERIDIAN BOULEVARD			615-465-70	00
	y or town, state or province, country, and ZIP or foreign RANKLIN, TN 37067	postal code		C If exemption application is p	ending, check here
	Check all that apply: Initial return	Initial return of a f	ormer public charity	D 1. Foreign organizations	s, check here
	Final return	Amended return		,	
	Address change	Name change		Foreign organizations me check here and attach co	emputation
ΗC		exempt private foundation		E If private foundation sta	
<u> </u>	Section 4947(a)(1) nonexempt charitable trust	Other taxable private found		under section 507(b)(1)	)(A), check here $ ightharpoonup$
	· I	ting method: L Cash	X Accrual	F If the foundation is in a	
		Other (specify)	basis )	under section 507(b)(1)	)(B), check here
	•\$ 6,685,664. (Part I, col		Y	(2) \$ dunated = 24	(d) Disbursements
	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received			N/A	
•	2 Check X if the toundation is not required to attach Sch B interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
Revenue	6a Net gain or (loss) from sale of assets not on line 10  Gross sales price for all assets on line 6a				
eve	7 Capital gain net income (from Part IV, line 2)		0.	,	
Œ	8 Net short-term capital gain		_		
	9 Income modifications Gross sales less returns				
	103 and allowances	ļ			
	D Less Cost of goods sold		<u> </u>		
	c Gross profit or (loss)  11 Other income	·.·			
	12 Total Add lines 1 through 11	0.	0.		
	13 Compensation of officers, directors, trustees, etc	0.	0.		0.
	14 Other employee salaries and wages		- **	1 -III	
	15 Pension plans, employee benefits		, - , , · \ <u>-</u> , -)		
Expenses	16a Legal fees		U \ \ \	70	
pen	b Accounting fees	101			
_	l .	ابة	MUA = 7 (19)	,	
ţį	17 Interest	7		<del>                                     </del>	ļ <u></u>
stra	18 Taxes	<u> </u>	<u> </u>	ر ر	-
ij	19 Depreciation and depletion 20 Occupancy	1	t 33	<u>  '                                </u>	
Administrative	20 Occupancy 21 Travel, conferences, and meetings				
ğ	22 Printing and publications	··			
e G	23 Other expenses	-		1	
턃	24 Total operating and administrative				† · · · · · · · · · · · · · · · · · · ·
Operating and	expenses. Add lines 13 through 23	0.	0.		0.
0	25 Contributions, gifts, grants paid	491,760.			0. 491,760.
	26 Total expenses and disbursements.				
	Add lines 24 and 25	491,760.	0.		491,760.
	27 Subtract line 26 from line 12:	401 700			
	& Excess of revenue over expenses and disbursements	<491,760.	0.		
	b Net investment income (if negative, enter -0-)  c Adjusted net income (if negative, enter -0-)		<u> </u>	N/A	
	T - velnoren ner monine (n uaffansa' aura -o-)		L	1 41/44	L

423501 11-24-14 LHA For Paperwork Reduction Act Notice, see instructions.

Foi	m 99	0-PF (2014) COMMUNITY HEALTH SYSTEM	S FOUNDATION	20-	3323391	Page 2
	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	f year	
_	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Va	alue
	1	Cash - non-interest-bearing	7,177,424.	6,685,664.	6,685,0	664.
	2	Savings and temporary cash investments				
	3	Accounts receivable ►				
		Less; allowance for doubtful accounts				
	4	Pledges receivable ▶				
		Less; allowance for doubtful accounts ▶				
	5	Grants receivable			-	
	1	Receivables due from officers, directors, trustees, and other				
	ľ	disqualified persons				
	7					
	l ′	Other notes and loans receivable  Less: allowance for doubtful accounts				
	١.	Inventories for sale or use				
Assets	8				-	
Ass	1	Prepaid expenses and deferred charges				<del></del>
•	1	Investments - U.S. and state government obligations	_			
	l	Investments - corporate stock				
	C	Investments - corporate bonds				
	11	Investments - land, buildings, and equipment, basis				
		Less accumulated depreciation				
	12	Investments - mortgage loans				
	13	Investments - other				
	14	Land, buildings, and equipment basis ▶				
		Less accumulated depreciation				
	15	Other assets (describe ► )				
		Total assets (to be completed by all filers - see the				
		instructions. Also, see page 1, item 1)	7,177,424.	6,685,664.	6,685,6	664.
_	17	Accounts payable and accrued expenses	7,177,424.	6,685,664. 2,300.	,	
	18	Grants payable				
'n	19	Deferred revenue				
abilities	20	Loans from officers, drectors, trustees, and other disqualified persons				
<u>=</u>	21	Mortgages and other notes payable		<del> </del>		
≘.	1	Other liabilities (describe )				
	22	Other labilities (describe				
	00	Total liabilities (add loss 17 through 22)	2,300.	2,300.		
	23	Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here	2,300.	2,300.		
		·				
ŝ		and complete lines 24 through 26 and lines 30 and 31.	7 175 104	6 602 264		
ances	24	Unrestricted	7,175,124.	6,683,364.		
		Temporarily restricted				
8	26	Permanently restricted	···································			
Š		Foundations that do not follow SFAS 117, check here	İ			
Net Assets or Fund Bal		and complete lines 27 through 31.				
2		Capital stock, trust principal, or current funds				
Se	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
ĕ	29	Retained earnings, accumulated income, endowment, or other funds				
Ž	30	Total net assets or fund balances	7,175,124.	6,683,364.		
_						
	31	Total liabilities and net assets/fund balances	7,177,424.	6,685,664.		
_		III Analysis of Changes in Net Assets or Fund Ba		·····		
	art	III Analysis of Changes III Net Assets of Fullu ba	aidiices			
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 3	30			
	(mus	t agree with end-of-year figure reported on prior year's return)		. 1	7,175,1	124.
2	Ente	amount from Part I, line 27a		2	<491,7	760.>
3	Othe	r increases not included in line 2 (itemize)		3	-	0.
4	Add	ines 1, 2, and 3		4	6,683,3	364.
5	Decr	eases not included in line 2 (itemize)	•	5	!	0.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	6,683,3	364.
					Form <b>990-PF</b>	

423511 11-24-14

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)					w acquired Purchase Donation	(c) Date (mo., c	acquired day, yr.)	(d) Date sold (mo., day, yr.)
1a								
b NOM	VE					_		<u> </u>
C				-				
<u>d</u>				-				<del></del>
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				ain or (loss) s (f) minus (	
a						·····		
b			•					
С								_
d		ļ						
e	////	1	40/04/00	_				
Complete only for assets snowing	gain in column (h) and owned by	· · · · · · · · · · · · · · · · · · ·		_	C	(I) Gains (C ol. (k), but	Col. (h) gain not less that	minus 1 -0-1 or
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (1), if any			Losses	(from col. (	h))
a		<del>                                     </del>						
b	· · · · · · · · · · · · · · · · · · ·	+						
d		+		-+				
e		+		-				
	oital loss) { If gain, also ent	er in Part I, line	7	7	_			
2 Capital gain net income or (net cap	ortal loss) \(\frac{1}{2}\) If (loss), enter -	0- in Part I, line	7	<i>"</i>	2			
3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, of if (loss), enter -0- in Part I, line 8	,	and (6);		}	3			
Part V   Qualification U	nder Section 4940(e) fo	r Reduced	Tax on Net	Inve	stment In	come	<del></del>	
(For optional use by domestic private								
	·			,				
If section 4940(d)(2) applies, leave the	is part diank.							
Was the foundation liable for the secti	on 4942 tax on the distributable a	mount of any ye	ear in the base per	rod?				Yes X No
If "Yes," the foundation does not quali								<del></del>
1 Enter the appropriate amount in e		instructions bet	fore making any e			1		/d\
Base period years Calendar year (or tax year beginnin			Net value of no				Distrib (col. (b) div	(d) oution ratio olded by col. (c))
2013	1	87,925.			210,39			.053801
2012		85,168.			556,84			.037736
2011		45,179. 84,264.			814,46 990,00			.031375
2010		88,048.		1,	546,46	3		.041361
2009		00,040.		4,	340,40	<del>-                                     </del>	т —	•041301
2 Total of line 1, column (d)						2		.237397
3 Average distribution ratio for the 5	-vear base period - divide the tota	I on line 2 by 5.	or by the number	of years	:	<u> </u>	<del> </del>	123,33,
the foundation has been in existen			or by the nomber	o. your.	•	3		.047479
4 Enter the net value of noncharitable	e-use assets for 2014 from Part X	C, line 5				4	<u> </u>	6,740,047.
5 Multiply line 4 by line 3			-			5	<u> </u>	320,011.
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)					6		0.
7 Add lines 5 and 6						7		320,011.
8 Enter qualifying distributions from	Part XII, line 4					8		491,760.
If line 8 is equal to or greater than See the Part VI instructions.		ne 1b, and comp	lete that part usin	g a 1%	tax rate.			

Form 990-PF (2014) COMMUNITY HEALTH SYSTEMS FOUN			332			Page 4
Part VI Excise Tax Based on Investment Income (Section 49		4948	- see	instru	ctio	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here  and	enter "N/A" on line 1.					
<u></u>	ecessary-see instructions)					
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	➤ X and enter 1%	1				0.
of Part I, line 27b						
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4	% of Part I, line 12, col. (b).					
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only.	Others enter -0-)	2	1			0.
3 Add lines 1 and 2		3				0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only.	Others enter -0-)	4				0.
5 Tax based on Investment income. Subtract line 4 from line 3. If zero or less, enter -0-	,	5				0.
6 Credits/Payments:	•		<del>                                     </del>			
a 2014 estimated tax payments and 2013 overpayment credited to 2014	6a					
b Exempt foreign organizations - tax withheld at source	6b	-	1			
c Tax paid with application for extension of time to file (Form 8868)	6c	⊣				
d Backup withholding erroneously withheld	6d					
7 Total credits and payments. Add lines 6a through 6d	00	٦,				0.
	 toobad	8	<del> </del>			<del></del>
	La Cried	_	<del> </del>			0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	<del> </del>			
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	la	10	<u> </u>			
11 Enter the amount of line 10 to be: Credited to 2015 estimated tax	Refunded >	<u>  11</u>				
Part VII-A   Statements Regarding Activities						
1a During the tax year, did the foundation attempt to influence any national, state, or local leg	islation or did it participate or interve	ne in			Yes	
any political campaign?				1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purp	oses (see instructions for the definiti	on)?		1b		Х
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities a	and copies of any materials publis	shed or				
distributed by the foundation in connection with the activities				'		
c Did the foundation file Form 1120-POL for this year?	•			1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during t	he year:					
(1) On the foundation. ▶ \$ 0 • (2) On foundation manage	ers. ▶ \$	٠.				
e Enter the reimbursement (if any) paid by the foundation during the year for political exper	diture tax imposed on foundation				ļ	
managers. ► \$ 0 •						
2 Has the foundation engaged in any activities that have not previously been reported to the	RS?			2		X
If "Yes," attach a detailed description of the activities						
3 Has the foundation made any changes, not previously reported to the IRS, in its governin	g instrument, articles of incorporation	ı, or				
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the char				3		Х
4a Did the foundation have unrelated business gross income of \$1,000 or more during the y	ear?			4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		-	N/A	4b		$\vdash$
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?						X
If "Yes," attach the statement required by General Instruction T		-		5		_
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	lether					1
By language in the governing instrument, or	, 0,					ł
By state legislation that effectively amends the governing instrument so that no mandal	tory directions that conflict with the st	ate law				
remain in the governing instrument?	tory directions that commet with the st	arc lave		6	Х	1
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes, " c	complete Part II col (c) and Part	νν ··		7	X	├─
7 Did the loundation have at least \$3,000 in assets at any time during the year? If Tes, C	omplete Part II, cor (c), and Part	^V		<u> </u>		├─
On Finder the states to which the foundation reports or with which it is registered (one instruct	tions)					
8a Enter the states to which the foundation reports or with which it is registered (see instruc	lions) –					ł
TN	Attornoy Conord (as designed)					1
b if the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	: Allorney General (or designate)			,	v	
of each state as required by General Instruction G? If *No, * attach explanation	40.40()(0)			8b	X	<b>├</b> ─
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,	•			9		X
10 Did any persons become substantial contributors during the tax year? if "Yes," attach a scho	edule listing their names and addresses			10		X
			For	m <b>990</b>	-PF	(2014)

423531 11-24-14

Form	1990-PF (2014) COMMUNITY HEALTH SYSTEMS FOUNDATION 2	0-332339	1	Page 5
Pá	art 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	1	Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privi	leges?		
	If "Yes," attach statement (see instructions)	11	2	Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	1:	3 X	
	Website address ► N/A			
14	The books are in care of ▶ COMMUNITY HEALTH SYSTEMS  Telephone no. ▶	<del>515-465-</del>	7000	
		IP+4 ▶3706		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<b></b>	
	and enter the amount of tax-exempt interest received or accrued during the year	15	N/A	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	11	6	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of	the		
	foreign country >			
Pa	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	X No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
		X No		
		X No		
	· · · · · · · · · · · · · · · · · · ·	X No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available	,		
	· · · · · · · · · · · · · · · · · · ·	X No		
	(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			
	· · · · · · · · · · · · · · · · · · ·	X No		
b	of fany 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)?	N/A 1	<u> </u>	<u> </u>
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
_	before the first day of the tax year beginning in 2014?	1	C	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	X No	-	
	·· · · · · · · · · · · · · · · · · · ·	MO A		
	If "Yes," list the years , , , ,			
	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach		Ì	
	statement - see instructions.)	N/A 2	.	
	: If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.	"/ F   -2	<u> </u>	<del></del>
	N 17 / 3	İ		
3.0	N/A , , , , , , , , , , , , , , , , , , ,			
00	during the year?	X No		
H	olf "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after	(22) 110		
	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	ose		
	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.)	N/A 3	ь	
40	1 Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4	$\overline{}$	X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose the	<b></b>	<del>-   -</del>	<del>                                     </del>
Ī	had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4	ь	х
_		<del></del>	90-PF	
				/

Form 990-PF (2014) COMMUNITY HEALTH SYSTEMS			20-33233	91 Page 6			
Part VII-B   Statements Regarding Activities for Which I	Form 4720 May Be	Required (contin	ued)				
5a During the year did the foundation pay or incur any amount to:							
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?							
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indir						
any voter registration drive?			es X No	1 1			
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y	es X No				
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section						
4945(d)(4)(A)? (see instructions)			es X No				
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or						
the prevention of cruelty to children or animals?		<del></del>	es X No				
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	•	ın Regulations					
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b			
Organizations relying on a current notice regarding disaster assistance check h		•••	▶∟				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi							
expenditure responsibility for the grant?		I/A Ye	s L No				
If "Yes," attach the statement required by Regulations section 53 494			İ				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on						
a personal benefit contract?		Ye	es X No				
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		ļ.	6b X			
If "Yes" to 6b, file Form 8870							
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es X No				
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b			
Part VIII   Information About Officers, Directors, Trustone Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	<i>(</i>				
List all officers, directors, trustees, foundation managers and their	compensation						
List all Officers, directors, trustees, foundation managers and their	(b) Title, and average	(c) Compensation	(d) Contributions to	T (a) Eynense			
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other			
	to position	enter -O-)	compensation	allowances			
SEE STATEMENT 1		0.	0.	0.			
		<del> </del>	•	<del>                                     </del>			
				:			
				<del>                                     </del>			
		<del> </del>		+			
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."					
( ) Name and address of such ampleyee and more than \$50,000	(b) Title, and average	4 . 0	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	and deferred	allowances			
NONE	·		ounpy,nason.	<del>                                     </del>			
				•			
	<del></del>		·· <del>····</del>	<del>                                     </del>			
				1			
				<u> </u>			
				1			
Total number of other employees paid over \$50,000		·	<b></b>	0			
			Form	990-PF (2014)			

Total. Add lines 1 through 3

	m 990-PF (2014) COMMONITE HEALTH SISTEMS FOUNDATION	20	3323391 Tage 0
<u> P</u>	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	6,842,687.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	6,842,687.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	6,842,687.
4	Cash deemed held for charatable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	102,640.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	6,740,047.
6	Minimum Investment return. Enter 5% of line 5	6	337,002.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations ar foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	337,002.
	Tax on investment income for 2014 from Part VI, line 5		
	Income tax for 2014. (This does not include the tax from Part VI.)	1	
c	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	337,002.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	337,002.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	337,002.
	art XII I	<del>''</del>	33770020
<u> </u>	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	491,760.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the	1	
а	Suitability test (prior IRS approval required)	3a	0.
b	Cash distribution test (attach the required schedule)	3b	0.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	491,760.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	491,760.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies fo	r the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,	Ottpus	Tears prior to 2015	2010	2014
line 7				337,002.
2 Undistributed income, if any, as of the end of 2014				00.700_0
a Enter amount for 2013 only			28,806.	
b Total for prior years:			20,000	
g rounted prior yours.		0.		
3 Excess distributions carryover, if any, to 2014:		<u> </u>		
a From 2009 0 .				
bFrom 2010 0 •				
c From 2011 0 •				
dFrom 2012 0 •				
eFrom 2013 0 •			:	
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2014 from				
Part XII, line 4: ►\$ 491,760.				
a Applied to 2013, but not more than line 2a			28,806.	
b Applied to undistributed income of prior	· · · · · · · · · · · · · · · · · · ·		··· · · · · · · · · · · · · · · · · ·	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount				337,002.
e Remaining amount distributed out of corpus	125,952.			
5 Excess distributions carryover applied to 2014	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))			·	
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	125,952.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line		<del>-</del>		
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract			<u> </u>	<u> </u>
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)	0.			
8 Excess distributions carryover from 2009	<del>"-</del> '			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	125,952.			
10 Analysis of line 9:				
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
dExcess from 2013			į	
e Excess from 2014 125, 952.			l	
423581 11-24-14				Form <b>990-PF</b> (2014)

	TY HEALTH S				23391 Page 10
Part XIV Private Operating F	·	<del></del>	II-A, question 9)	N/A	<del></del>
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo	· ·	<del>-</del>	#	14042(1)(2) or 1 140	
b Check box to indicate whether the found		ng toundation described	Prior 3 years	4942(j)(3) or49	42(1)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
income from Part I or the minimum	(4)2014	(0)2010	(0)2012	(6/2011	(0) 10:01
investment return from Part X for					
each year listed					<del></del>
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed  d Amounts included in line 2c not			<del> </del>		
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly		<del></del>			
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter: (1) Value of all assets					
• •		<del> </del>		+	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test - enter		<del>   </del>			
2/3 of minimum investment return				j	
shown in Part X, line 6 for each year listed		ļ			
c "Support" alternative test - enter:		<del> </del>			
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public				<del></del>	
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from		<u> </u>			
an exempt organization	,				
(4) Gross investment income					·····
Part XV   Supplementary Info	rmation (Comple	ete this part only	if the foundatio	n had \$5,000 or mo	ore in assets
at any time during t	he year-see inst	ructions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh	o have contributed more	than 2% of the total cor	tributions received by th	e foundation before the clos	se of any tax
year (but only if they have contributed r	nore than \$5,000). (See	section 507(d)(2).)			
NONE					
b List any managers of the foundation wh			(or an equally large port	tion of the ownership of a pa	artnership or
other entity) of which the foundation ha	s a 10% or greater intere	est.			
NONE			. <u> </u>		
2 Information Regarding Contribut	ion, Grant, Gift, Loar	, Scholarship, etc., f	Programs:		
Check here 🕨 🗓 if the foundation of					
the foundation makes gifts, grants, etc.	(see instructions) to indi	viduals or organizations	under other conditions, i	complete items 2a, b, c, and	l d.
a The name, address, and telephone num	ber or e-mail address of	the person to whom app	lications should be addr	essed:	
N/A					
b The form in which applications should t	e submitted and informa	ation and materials they	should include:		
N/A					
c Any submission deadlines:					
N/A					
d Any restrictions or limitations on award	s, such as by geographic	cal areas, charitable field:	s, kinds of institutions, or	other factors:	
N/A					
					- 000 77 175
423601 11-24-14					Form <b>990-PF</b> (2014)

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Purpose of grant or contribution Foundation status of show any relationship to Amount any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year AMERICAN CANCER SOCIETY PUBLIC MATCHING GRANT OR GIFT 2000 CHARLOTTE AVE NASHVILLE, TN 37203 5,000. AMERICAN DIABETES ASSOCIATION MATCHING GRANT OR GIFT PUBLIC ATTN: TOUR DE CURE, 220 GREAT CIRCLE ROAD, STE 134 NASHVILLE, TN 37228 500. AMERICAN HEART ASSOCIATION PUBLIC MATCHING GRANT OR GIFT 1818 PATTERSON STREET NASHVILLE, TN 37203 5,500. AMERICAN RED CROSS PUBLIC MATCHING GRANT OR GIFT 2201 CHARLOTTE AVE 1,500. NASHVILLE, TN 37203 PUBLIC MATCHING GRANT OR GIFT AMERICAN RED CROSS, WHERE IT'S NEEDED MOST 2025 E STREET NW WASHINGTON, DC 20006 500 SEE CONTINUATION SHEET(S) → 3a 491,760. b Approved for future payment PUBLIC MATCHING GRANT OR GIFT HARDING ACADEMY 170 WINDSOR DRIVE NASHVILLE, TN 37205 1,500. 1,500. 3b Total

Part XVI-A	Anal	vsis of	Income	-Producing	<b>Activities</b>
I WILKEI A	71141	, ,,,,	111001110	1 100001119	ACTIVITIES

nter gross amounts unless otherwise indicated.	Unrelated t	ousiness income		y section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Amount	code	Ainount	- Talletion income
a N/A					<del> </del>
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					-
2 Membership dues and assessments	,				
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities		-			
5 Net rental income or (loss) from real estate:					····
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property	1				
7 Other investment income			<del></del>		
8 Gain or (loss) from sales of assets other	<del></del>		1 1		<del>.</del>
than inventory			1 1		
Net income or (loss) from special events			1 1		
O Gross profit or (loss) from sales of inventory			1		·
1 Other revenue:			<del></del>	<del>-</del>	
a a					
<u> </u>	- <del>  -</del> -		+ +		
<u> </u>	-		+ +	<del></del>	
4	-		<del>-   -  </del>		
<u> </u>	-				
2 Subtotal. Add columns (b), (d), and (e)	-		<del>).     </del>	0.	0
13 Total. Add line 12, columns (b), (d), and (e)			<del>/•1</del>	13	0
				19	
See worksheet in line 13 instructions to verify calculations.)		_			
Part XVI-B Relationship of Activities	to the Accom	plishment of	Exempt P	urposes	
Line No. Explain below how each activity for which inc					

	the foundation's exempt purposes (other than by providing funds for such purposes).	
	N/A	
		· ·
		- · - ·
_		
		_
		<del></del>
-		
423621 11-24-14	<u> </u>	Form <b>990-PF</b> (2014

Form 990	D-PF (2014) CC	MMUNITY HEA	LTH SYS	TEMS FOUNDAT	TION	20-	3323391	Pa	age 13
Part 2			nsfers To	and Transactions	and Relation	ships With No	ncharitable	9	
		rganizations		<del></del>	<del></del>			N	I NI -
				ng with any other organizati		ction 501(c) of		Yes	NO
	•			27, relating to political orga	nizations?				
	•	foundation to a nonchar	nable exempt or	ganization of:			4-/45		<sub>v</sub>
	Cash				•		1a(1)	<del> </del>	X
	Other assets				•		1a(2)	<del> </del>	╀┷
	er transactions;						4.45		X
		icharitable exempt organi			-		1b(1)	_	X
٠,		m a noncharitable exemp	it organization		•		1b(2)	┝	X
(3) Rental of facilities, equipment, or other assets							1b(3) 1b(4)	$\vdash$	X
(4) Reimbursement arrangements							1b(4)	$\vdash$	$\frac{x}{x}$
٠.	Loans or loan guarante	es s or membership or fundi	micina colicitatio	nne			1b(5)		X
٠.		ent, mailing lists, other as	-				10(0)	$\vdash$	$\frac{n}{x}$
		· •		edule Column (b) should a	have chow the fair	r market value of the		ote .	<u> </u>
	•	•	•	ed less than fair market val	-		•	ocio,	
		goods, other assets, or se			oo iii arry nanouom	on or onaring arrang	anong onow m		
(a)Line n		• •		e exempt organization	(d) Descripti	on of transfers, transacti	ons, and sharing an	rangeme	ents
	N/				1		-		
					•				
							··· ·		
	** ***	<del></del>							
							_		
						·			
	<del>-</del>	-		or more tax-exempt organ	izations described			r===	=-
	` '	e (other than section 501	(c)(3)) or in sect	tion 527 <b>?</b>			Yes	X	No 🖸
<b>b</b> If "	Yes," complete the follow	•		I (h) Torre of annual materia		(-) D	-1-4		
(a) Name of organization				(b) Type of organization	(c) Description of relationship				
	1	I/A			-				
			<del></del>		<del> </del>				
					<del> </del>	·			
	<del></del>				<del> </del>				
	Linder penalties of permity	declare that I have examined	this return include	no accompanying schedules an	d statements and to ti	he hest of my knowledge			
Sign	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my know and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowle							discuss e prepa	rer
Here	D 7 (4)	i 4) [ ]		11/0/1-			shown below X Yes		ח`
	Signature of officer or	trustee		Date	Title	उर्ग रिट्			_ No
	Print/Type prepa		Preparer's s		TDate	Check if	PTIN		
	7,50	-	'	· ·	1	self- employed			
Paid	FRANCIS	J. BEDARD	France	o Heland	11/4/2015		P00752	421	_
		DELOTTE TA	X I.I.D	<i>V</i>	1 , 1, 2010	Firm's SIN N 8			

Use Only

Firm's address > 424 CHURCH STREET, SUITE 2400 NASHVILLE, TN 37219

Phone no. 615-259-1800

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor MATCHING GRANT OR GIFT PUBLIC AMERICAN SADDLEBRED MUSEUM 4083 IRON WORKS PARKWAY LEXINGTON, KY 40511 500. AMVETS PUBLIC MATCHING GRANT OR GIFT 4647 FORBES BLVD 500. LANHAM, MD 20706 ASSURANCE HOME, INC. PUBLIC MATCHING GRANT OR GIFT 1000 EAST 18TH STREET ROSWELL, NM 37067 3,150. BAYLOR UNIVERSITY PUBLIC MATCHING GRANT OR GIFT ONE BEAR PLACE #97050 WACO, TX 76798-7050 6,000. PUBLIC BIG BROTHERS BIG SISTERS OF MIDDLE MATCHING GRANT OR GIFT TENNESSEE 1704 CHARLOTTE AVE, SUITE 130 NASHVILLE, TN 37203 1,000. BOY SCOUTS OF AMERICA - MIDDLE PUBLIC MATCHING GRANT OR GIFT TENNESSEE COUNCIL P.O. BOX 150409, 3414 HILLSBORO PIKE NASHVILLE, TN 37215 2,000. PUBLIC MATCHING GRANT OR GIFT BRENTWOOD ACADEMY 219 GRANNY WHITE PIKE BRENTWOOD, TN 37027 4,000. PUBLIC MATCHING GRANT OR GIFT BRIGHTSTONE, INC. P.O. BOX 682966 FRANKLIN, TN 37068-2966 300. PUBLIC MATCHING GRANT OR GIFT CATAWBA COLLEGE OFFICE OF DEVELOPMENT, 2300 W. INNES STREET SALISBURY, NC 28144 500. COLUMBIA STATE COMMUNITY COLLEGE PUBLIC MATCHING GRANT OR GIFT FOUNDATION PO BOX 680102 FRANKLIN, TN 37068-0102 200,000. 478,760. Total from continuation sheets

Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor COMMUNITY FOUNDATION - RON & DIANE PUBLIC MATCHING GRANT OR GIFT SHAFER CHARITABLE FUND 3833 CLEGHORN AVENUE NASHVILLE, TN 37215 15,000. PUBLIC MATCHING GRANT OR GIFT COMMUNITY FOUNDATION - TOM & MARY MILLER FAMILY ADVISED FUND 3833 CLEGHORN AVENUE #400 NASHVILLE, TN 37215 10,000. CROSBY MIDDLE SCHOOL PTSA PUBLIC MATCHING GRANT OR GIFT 303 GATEHOUSE LANE LOUISVILLE, KY 40243 500. DREXEL UNIVERSITY PUBLIC MATCHING GRANT OR GIFT 3141 CHESTNUT STREET, SUITE 310 PHILADELPHIA, PA 19104 5,000. PUBLIC MATCHING GRANT OR GIFT FIDELITY CHARITABLE, PHYYLIS A. AND HARVEY KLEIN FUND P.O. BOX 77001 CINCINNATI, OH 45277-0053 25,000. FIDELITY INVESTMENTS CHARITABLE GIFT MATCHING GRANT OR GIFT PUBLIC FUND - PAT AND MARTY SCHWEINHART FUND P.O. BOX 77001 CINCINNATI, OH 45277 25,000. FRANKLIN AND MARSHALL COLLEGE PUBLIC MATCHING GRANT OR GIFT C/O COLLEGE ADVANCEMENT, P.O. BOX 3003 LANCASTER, PA 17604-3003 27,500. FRIENDS IN GENERAL C/O NASHVILLE PUBLIC MATCHING GRANT OR GIFT GENERAL HOSPITAL MEHARRY 1818 ALBION STREET NASHVILLE, TN 37208-2918 1,500. GATTON COLLEGE OF BUSINESS & PUBLIC MATCHING GRANT OR GIFT RCONOMICS UNIVERSITY OF KY, 255 GATTON COLLEGE OF BUSINESS & ECONOMICS BUILDING LEXINGTON, KY 40506-0034 250. GEORGETOWN COLLEGE PUBLIC MATCHING GRANT OR GIFT 400 EAST COLLEGE STREET GEORGETOWN, KY 40324 16,800. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or contribution show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor GILDA'S CLUB NASHVILLE PUBLIC MATCHING GRANT OR GIFT 1707 DIVISION STREET NASHVILLE, TN 37203 250. HAYWOOD STREET CONGREGATION PUBLIC MATCHING GRANT OR GIFT PO BOX 2982 ASHEVILLE, NC 28802 10,000. HELLEN KELLER INTERNATIONAL PUBLIC MATCHING GRANT OR GIFT 352 PARK AVENUE SOUTH, SUITE 1200 NEW YORK, NY 10010 5,000. PUBLIC HIGH HOPES, INC. MATCHING GRANT OR GIFT 301 HIGH HOPES CT FRANKLIN, TN 37064 500. PUBLIC HOPEHOUSE INTERNATIONAL MATCHING GRANT OR GIFT PO BOX 1097 FRANKLIN, TN 37065 500. JUVENILE DIABETES RESEARCH FOUNDATION PUBLIC MATCHING GRANT OR GIFT - MIDDLE TENNESSEE CHAPTER 105 WESTPARK DRIVE, STE. 415 BRENTWOOD, TN 37207 500. KATHY S. HARKEY BREAST CANCER PUBLIC MATCHING GRANT OR GIFT FOUNDATION 25403 I-45 N SUITE D THE WOODLANDS, TX 77380 5,000. PUBLIC MATCHING GRANT OR GIFT KENROSE ELEMENTARY SCHOOL PTO 1702 RAINTREE PARKWAY BRENTWOOD, TN 37027 250. LAFAYETTE COLLEGE PUBLIC MATCHING GRANT OR GIFT 730 HIGH STREET BASTON, PA 18042 2,500. LAFAYETTE INDUSTRIES PUBLIC MATCHING GRANT OR GIFT 179 GAYWOOD DRIVE MANCHESTER, MO 63021 1,000. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor LEGAL AID SOCIETY OF MIDDLE TENNESSEE MATCHING GRANT OR GIFT PUBLIC 300 DEADERICK STREET NASHVILLE, TN 37201 500. MENTAL HEALTH AMERICA OF MIDDLE TN PUBLIC MATCHING GRANT OR GIFT 295 PLUS PARK BLVD SUITE 201 200. NASHVILLE, TN 37217 MERCY HEALTH SERVICES INC PUBLIC MATCHING GRANT OR GIFT 1113 MURFREESBORO ROAD, SUITE 319 5,000. FRANKLIN, TN 37064 MATCHING GRANT OR GIFT MODEST NEEDS FOUNDATION PUBLIC 115 E. 30TH STREET, 1ST FLOOR 650. NEW YORK, NY 10016 NASHVILLE OPERA PUBLIC MATCHING GRANT OR GIFT 3622 REDMONT ST NASHVILLE, TN 37209 3,000. NASHVILLE RESCUE MISSION PUBLIC MATCHING GRANT OR GIFT PO BOX 333229 2,000. NASHVILLE, TN 37203 PUBLIC MATCHING GRANT OR GIFT NASHVILLE SYMPHONY ONE SYMPHONY PLACE 7,000. NASHVILLE, TN 37201-2031 PUBLIC MATCHING GRANT OR GIFT NATIONAL MS SOCIETY - MID-SOUTH CHAPTER 214 OVERLOOK CIRCLE BRENTWOOD TN 37027 2,300. NORTHWESTERN UNIVERSITY - WILDCAT MATCHING GRANT OR GIFT PUBLIC 1201 DAVIS STREET 957. EVANSTON, IL 60208 RONALD MCDONALD HOUSE CHARITIES OF PUBLIC MATCHING GRANT OR GIFT NASHVILLE TN INC 2144 FAIRFAX AVENUE NASHVILLE, TN 37212 2,000. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor SALVATION ARMY KENTUCKY & TENNESSEE MATCHING GRANT OR GIFT PUBLIC 214-216 W. CHESTNUT STREET LOUISVILLE, KY 40202 5,000. SANDY HOOK SCHOOL SUPPORT FUND PUBLIC MATCHING GRANT OR GIFT 85 WEST STREET 250. DANBURY , CT 06810 SCHWAB CHARITABLE FUND PUBLIC MATCHING GRANT OR GIFT 211 MAIN ST, 10TH FLOOR 25,000. SAN FRANCISCO, CA 94105 MATCHING GRANT OR GIFT SECOND HARVEST FOOD BANK PUBLIC 331 GREAT CIRCLE ROAD NASHVILLE, TN 37228 1,500. MATCHING GRANT OR GIFT ST. FRANCIS PREPARATORY SCHOOL PUBLIC 6100 FRANCIS LEWIS BLVD FRESH MEADOWS, NY 11365 5,000. STUDIO TENN THEATRE COMPANY PUBLIC MATCHING GRANT OR GIFT 1111 BATTLEWOOD STREET 810. FRANKLIN, TN 37069 PUBLIC MATCHING GRANT OR GIFT SUSAN G. KOMEN - NORTH CENTRAL ALABAMA 1909 27TH AVENUE SOUTH HOMEWOOD, AL 35209 1,000. PUBLIC MATCHING GRANT OR GIFT TENNESSEE PERFORMING ARTS CENTER P.O. BOX 190660, 211 SEVENTH AVE. NORTH, STE. LL-10 NASHVILLE, TN 37219 3,200. TENNESSEE WOMEN'S THEATER PROJECT PUBLIC MATCHING GRANT OR GIFT PO BOX 158525 250. NASHVILLE, TN 37215 PUBLIC MATCHING GRANT OR GIFT THE IRONMAN FOUNDATION 2701 NORTH ROCKY POINT DRIVE, STE 1250 500. TAMPA, FL 33607 Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor THE SHIPLEY SCHOOL MATCHING GRANT OR GIFT PUBLIC EXTERNAL RELATIONS OFFICE, 814 YARROW STREET BRYN MAWR, PA 19010 5,000. TIMOTHY'S GIFT PUBLIC MATCHING GRANT OR GIFT PO BOX 111642 NASHVILLE, TN 37222 1,000. TN BAPTIST CHILDREN'S HOME PUBLIC MATCHING GRANT OR GIFT PO BOX 2206 BRENTWOOD, TN 37024-2206 1,000. UNION THEOLOGICAL SEMINARY (FOR THE MATCHING GRANT OR GIFT PUBLIC POVERTY INITIATIVE) 3041 W. BROADWAY NEW YORK, NY 10027 2,000. UNITED WAY - METROPOLITAN NASHVILLE PUBLIC MATCHING GRANT OR GIFT RB. TOCQUEVILLE SOCIETY, 250 VENTURE CIRCLE NASHVILLE, TN 37228 10,000. UNIVERSITY OF KENTUCKY MATCHING GRANT OR GIFT PUBLIC 125 STURGILL DEVELOPMENT BUILDING LEXINGTON, KY 40506-0015 250. UNIVERSITY OF NORTH CAROLINA PUBLIC MATCHING GRANT OR GIFT ASHEVILLE ONE UNIVERSITY HEIGHTS ASHEVILLE, NC 28804 5,000. PUBLIC MATCHING GRANT OR GIFT UNIVERSITY OF TENNESSEE FOUNDATION (FOR UTK PARENTS AND FAMILIES FUND) 600 HENLEY STREET, SUITE B022 KNOXVILLE, TN 37902 2,500. URBAN YOUTH IMPACT PUBLIC MATCHING GRANT OR GIFT 2823 NO. AUSTRALIAN AVENUE WEST PALM BEACH, FL 33407 3,000. PUBLIC MATCHING GRANT OR GIFT US SQUASH 555 EIGHTH AVENUE, STE 1102 NEW YORK, NY 10018 5,000. Total from continuation sheets

Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount any foundation manager or substantial contributor contribution status of Name and address (home or business) recipient VIRGINIA MILITARY INSTITUTE PUBLIC MATCHING GRANT OR GIFT FOUNDATION NEIKIRK HALL, PO BOX 932 100. LEXINGTON, VA 24450 WAVES INC - BROOKWOOD CENTER PUBLIC MATCHING GRANT OR GIFT 145 SE PARKWAY, STE 100 FRANKLIN, TN 37064 1,000. WOMEN ROCK FOR CHARITY PUBLIC MATCHING GRANT OR GIFT 900A EAST CHURCH STREET BRENTWOOD, TN 37027 1,000. WOMEN SURVIVORS ALLIANCE PUBLIC MATCHING GRANT OR GIFT 3201 ASPEN GROVE DRIVE, #G9 FRANKLIN, TN 37067 543. PUBLIC MATCHING GRANT OR GIFT WOUNDED WARRIOR PROJECT ATTN: DONOR SERVICES, 4899 BELFORT ROAD, SUITE 300 JACKSONVILLE, FL 5,000. 32256 YOUTH SPORTS ALLIANCE PUBLIC MATCHING GRANT OR GIFT PO BOX 681698 250. PARK CITY, UT 84068 Total from continuation sheets

	LIST OF OFFICERS, DIRECTORS AND FOUNDATION MANAGERS			STATEMENT 1	
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE	
WAYNE T. SMITH	CHAIRMAN OF THE	BOARD & CI	O.	0.	
W.LARRY CASH	PRESIDENT 1.00	0.	0.	0.	
RACHEL A. SEIFERT	EXECUTIVE VICE	PRESIDENT 8	SECRETAL 0.	RY 0.	
MARTIN G. SCHWEINHART	EXECUTIVE VICE	PRESIDENT 0.	0.	0.	
JAMES W. DOUCETTE	SENIOR VICE PRE	ESIDENT & T	REASURER 0.	0.	
KEVIN J. HAMMONS	SENIOR VICE PRE	ESIDENT 0.	0.	0.	
CHRISTOPHER G. COBB	ASSISTANT SECRE	ETARY 0.	0.	0.	
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	0.	0.	0.	