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Return of Private Foundation

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

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OMB No 1545-0052

Open to Public Inspection

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Internal Revenue Service 2014, and ending For calendar year 2014 or tax year beginning A Employer Identification number Name of foundation 20-3835578 THE MULHOLLEM CRAVENS FOUNDATION Room/suite B Telephone number (see instructions) Number and street (or P O box number if mail is not delivered to street address) () C/O PAUL B MULHOLLEM JR. P.O. BOX 192 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here CARLISLE, KY 40311 Initial return Initial return of a former public charity G Check all that apply D 1. Foreign organizations, check here . Amended return Final return 2. Foreign organizations meeting the 85% test, check here and attach Address change Name change computation X Section 501(c)(3) exempt private foundation H Check type of organization E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here . J Accounting method. X Cash Fair market value of all assets at If the foundation is in a 60-month termination Other (specify) end of year (from Part II, col. (c), line under section 507(b)(1)(B), check here 16) **▶** \$ 2,033,818. (Part I, column (d) must be on cash basis) (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and (b) Net investment (c) Adjusted net for charitable total of amounts in columns (b), (c), and (d) expenses per income nurnoses may not necessarily equal the amounts in income hooks (cash basis only) column (a) (see instructions)) 292,500. Contributions, gifts, grants, etc., received (attach schedule) . Check ▶ if the foundation is not required to attach Sch B 2 9,254 9,254. ATCH 1 3 Interest on savings and temporary cash investments. 33,492. 33,492. ATCH 2 Dividends and interest from securities b Net rental income or (loss) 157,966 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 815,938. 157,966. Capital gain net income (from Part IV, line 2), Net short-term capital gain..... Income modifications . 10 a Gross sales less returns and allowances . . . b Less Cost of goods sold . c Gross profit or (loss) (attach schedule) Other income (attach schedule) 11 493,212. 200,712. 12 Total. Add lines 1 through 11 OGDEN, UT 13 Compensation of officers, directors, trustees, etc. Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits 44 16a Legal fees (attach schedule) ATCH 3. . . . 2,600. 2,600. Accounting fees (attach schedule)ATCH 4 Administrative E 11,224. 11,224. Other professional fees (attach schedule). [5] 413. Taxes (attach schedule) (see instructions)[6]. Depreciation (attach schedule) and depletion. 21 22 Travel, conferences, and meetings Printing and publications Operating 52 25. 25. Other expenses (attach schedule) ATCH .7. . Total operating and administrative expenses. 14,306. 13,824. 25. Add lines 13 through 23. 237,500. 237,500. Contributions, gifts, grants paid 251,806. 13,824. 237,525 26 Total expenses and disbursements Add lines 24 and 25 Subtract line 26 from line 12: 241,406. 2 Excess of revenue over expenses and disbursements . . 186,888. Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-). .

JSA For Paperwork Reduction Act Notice, see Instructions.

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Form 990-PF (2014)

		Attached schedules and amounts in the	Beginning of year	End	of year
Ľ)	art II	Balance Sheets description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
١	2	Savings and temporary cash investments	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	563,281.	563,325
1	3	Accounts receivable ▶			İ
ı		Less allowance for doubtful accounts ▶			
	4	Pledges receivable			
Ì		Less allowance for doubtful accounts ▶	L		
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts ▶	7		
ţ	8	Inventones for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ř	10 a	Investments - U S and state government obligations (attach schedule)[8]	· · ·	163,488.	168,627
		Investments - corporate stock (attach schedule) ATCH 9	1,247,318.	1,216,641.	
		Investments - corporate bonds (attach schedule) ATCH 10	75,027.		
1	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation	1		
-	12	(attach schedule) Investments - mortgage loans			
	13	Investments - other (attach schedule)		· · · · · · · · · · · · · · · · · · ·	
	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			
		instructions. Also, see page 1, item I)		1,943,410.	2,033,818.
	17	Accounts payable and accrued expenses		· · _ · _ · _ · _ · _ · _ · _ · _	
	18	Grants payable			†
S	19	Deferred revenue			
itie	20	Loans from officers, directors, trustees, and other disqualified persons		·	1
Liabilities	21	Mortgages and other notes payable (attach schedule)			1
Ĕ	22	Other liabilities (describe			1
				- "	†
	23	Total liabilities (add lines 17 through 22)		()
		Foundations that follow SFAS 117, check here.	 		
		and complete lines 24 through 26 and lines 30 and 31.			}
ä	24	Unrestricted	1		
lances	25				
Ba	26	Temporarily restricted			1
핕	20	Foundations that do not follow SFAS 117, \blacktriangleright $\stackrel{\times}{\boxtimes}$	 		7
교		check here and complete lines 27 through 31.			
Net Assets or Fund Ba	27	Capital stock, trust principal, or current funds	1,707,674.	1,943,410.	
ets	28	Paid-in or capital surplus, or land, bldg , and equipment fund		2,010,120	1
SS	29	Retained earnings, accumulated income, endowment, or other funds			1
*	30	Total net assets or fund balances (see instructions)	1,707,674.	1,943,410.	1
ž	31	Total liabilities and net assets/fund balances (see	27,0,70,11	1/3/3/410.	1
	٠.	instructions)	1,707,674.	1,943,410.	
Ē	art l	Analysis of Changes in Net Assets or Fund Bala		1,343,410.	L
_		al net assets or fund balances at beginning of year - Part		oust agree with	
1				- ,	1,707,674
2	Ent	-of-year figure reported on prior year's return)er amount from Part I, line 27a			241,406
2	CH4	er amount from Part I, line 27a er increases not included in line 2 (itemize) ATCH 11		2	+
J	V(1)	lines 1.2 and 3		3	1 949 762
•	Auu	mies I, Z, and S		4	1,949,762
		reases not included in line 2 (itemize) ► ATCH_12 at net assets or fund balances at end of year (line 4 minus			6,352
_0	106	arnet assets or rund balances at end of year (line 4 minus	s iii le ၁) - Pait II, COlumn (b	o), line 30 6	1,943,410.

Capital Gains and Losses for Tax on Investment Income

Page	

(a) List and 2-story br	acquired P - Purchase D - Donation	(c) Date acquired (mo, day, yr.)	(d) Date sold (mo , day, yr.)		
1a SEE PART IV SCHEI	OULE		D - Donagon		
<u>b</u>			 		
d d			 		
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu	
_a			 		_
<u>b</u>			 		
c d					
е					
	showing gain in column (h) and owner	d by the foundation on 12/31/69	0	Gains (Col. (h) ga	ain minus
(I) F.M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		(k), but not less t Losses (from co	han -0-) or
a			ļ		
<u>b</u>			ļ		
<u>C</u>					
<u>d</u>					
Capital gain net income of		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		157,966.
3 Net short-term capital ga	اا الله الله الله الله (loss) as defined in sections الله الله الله الله الله الله الله الل	• •	-		137,500.
	art I, line 8, column (c) (see inst				
			3		0
	Inder Section 4940(e) for Rec		ncome		
If "Yes," the foundation does	the section 4942 tax on the distrib not qualify under section 4940(e)	Do not complete this part.	·		Yes X No
	nount in each column for each yea	r, see the instructions before making	ng any ent		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution ra (col (b) divided by	col (c))
2013	236,207.	1,517,971.	 		0.155607
2012	363,312.	1,420,719.	 		0.255724
2011 2010	218,440. 137,613.	1,535,378. 1,440,898.	 		0.142271
2009	187,543.	1,425,269.	 		0.131584
			 		0.101001
2 Total of line 1, column (d	0		2		0.780691
3 Average distribution ratio	for the 5-year base period - divid	e the total on line 2 by 5, or by the			
	ndation has been in existence if les		3		0.156138
4 Enter the net value of no	ncharitable-use assets for 2014 fro	om Part X, line 5	4	1,	668,191.
5 Multiply line 4 by line 3.			5		260,468.
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		1,869.
7 Add lines 5 and 6			7		262,337.
8 Enter qualifying distribution of the British is equal to or growth.			1 1		

	tVI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstru	ctions	s)
40	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
Та	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
, ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check		3,7	738.
-	here and enter 1% of Part I, line 27b			
r	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
Ū	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			
3	Add lines 1 and 2		3,7	738.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0
5	Tax based on Investment Income. Subtract line 4 from line 3 If zero or less, enter -0		3,7	738.
6	Credits/Payments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 4,200.			
b				
c	Tax paid with application for extension of time to file (Form 8868) 6c			
ď	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		4,2	200.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.		4	462.
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ 462. Refunded ▶ 11			
Pa	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		Х
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			{
	Instructions for the definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			-
	published or distributed by the foundation in connection with the activities		ı	}
С	Did the foundation file Form 1120-POL for this year?	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ▶ \$(2) On foundation managers ▶ \$			Ì
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		X
	If "Yes," attach a detailed description of the activities)		ļ
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			-
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3_		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			İ
	conflict with the state law remain in the governing instrument?	6	<u> X</u>	Ļ
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	ļ
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			İ
	IL, KY,			İ
ģ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		_	Ì
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	<u> </u>
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,"			Ì
	complete Part XIV	9_		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			1
	names and addresses	10		X
	E	qq	O-PF	/2014

Pai	rt VII-A Statements Regarding Activities (continued)			
	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		_X_
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified		1 1	
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13_	_X_	
	Website address ►N/A			
14	The books are in care of ▶ PAUL B. MULHOLLEM, JR. Telephone no ▶			
	Located at ▶P.O. BOX 192 CARLISLE, KY ZIP+4 ▶ 40311			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		🕨	
	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		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	L	<u>X</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-221) If			
Da	"Yes," enter the name of the foreign country rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u></u>		
لكما		i	Yes	No
4.	File Form 4720 If any item is checked in the "Yes" column, unless an exception applies. During the year did the foundation (either directly or indirectly)		163	140
10	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(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	Ì	'	
	foundation agreed to make a grant to or to employ the official for a period after	ļ		
	termination of government service, if terminating within 90 days)	ļ		
t	olf 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		
	Organizations relying on a current notice regarding disaster assistance check here		1	
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?	1c		<u>X</u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1		
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	l		
ā	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?		1	
	6e, Part XIII) for tax year(s) beginning before 2014?	1		
,	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) to)		
	all years listed, answer "No" and attach statement - see instructions)	2b		Х
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>	{		
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
ŧ	off "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or	1		
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the	1		
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of	İ		
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	j]	
	foundation had excess business holdings in 2014)	3b	<u> </u>	<u> </u>
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<u> </u>	<u>X</u>
t	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	0.00	X
	Fo	m 99	ソートト	(2014)

	tVII-B Statements Regarding Activities	for Which Form	4720 May Be Req	uired (continued)		
	During the year did the foundation pay or incur any amou					
Ju	(1) Carry on propaganda, or otherwise attempt to influe		n 4945(e))?	Yes X No	,	
•	(2) Influence the outcome of any specific public ele					
	directly or indirectly, any voter registration drive?				,	
	(3) Provide a grant to an individual for travel, study, or of				,	
	(4) Provide a grant to an individual for titales, study, or of					
	section 4945(d)(4)(A)? (see instructions)				,	
	(5) Provide for any purpose other than religious, ch					
	purposes, or for the prevention of cruelty to children				,] !	
b	If any answer is "Yes" to 5a(1)-(5), did any of the			• —	,)	
	Regulations section 53.4945 or in a current notice regard				5b	
	Organizations relying on a current notice regarding disas	_	•			
_	If the answer is "Yes" to question 5a(4), does the					
·	because it maintained expenditure responsibility for the					
	If "Yes," attach the statement required by Regulations sec					}
6a	Did the foundation, during the year, receive any fun		ectly to nay premiur	ne		
va				Yes X No	,	}
h	on a personal benefit contract?				6ь	X
	If "Yes" to 6b, file Form 8870	city of indirectly, on a	personal benefit contra			
7a	At any time during the tax year, was the foundation a pa	arty to a prohibited ta	v shelter transaction?	Yes X No	.)
b	If "Yes," did the foundation receive any proceeds or have			. — —		1
	Information About Officers, Director	rs, Trustees, Fou	Indation Manager	s, Highly Paid Emp	oloyees,	\
	and Contractors					
	List all officers, directors, trustees, foundation n	(b) Title, and average	(c) Compensation (see	(d) Contributions to		
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation		e account, owances
ATC	Н 13		0	d		0
			·			
						~
)		
2	Compensation of five highest-paid employees	(other than thos	se included on lin	e 1 - see instructi	ons). If n	one, enter
	"NONE."	r		(d) Contributions to		
(a)	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit	(e) Expens	e account,
		devoted to position		plans and deferred compensation	other all	owances
	NONE		<u> </u>			
				}		
		}				
Tota	I number of other employees paid over \$50,000.					
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Page	

Par	* Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	reign founda	tions,
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	1,558,245.
b	Average of monthly cash balances	. 1b	135,350.
C	Fair market value of all other assets (see instructions).		
d	l Total (add lines 1a, b, and c)	. 1d	1,693,595.
0	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	. 2	
3	Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, se	3	1,693,595.
4			
	instructions)		25,404.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line	·	1,668,191.
6	Minimum Investment return. Enter 5% of line 5		83,410.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations check here ▶ □ and do not complete this part)	oundations	
1	Minimum investment return from Part X, line 6	. 1	83,410.
2a	Tax on investment income for 2014 from Part VI, line 5	8.	
b	Income tax for 2014. (This does not include the tax from Part VI.) . 2b		
С		2c	3,738.
3	Distributable amount before adjustments. Subtract line 2c from line 1		79,672.
4	Recoveries of amounts treated as qualifying distributions	. 4	
5	Add lines 3 and 4		79,672.
6	Deduction from distributable amount (see instructions)		
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XII	11,	
	line 1	. 7	79,672.
	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		000 505
a		. 1a	237,525.
	Program-related investments - total from Part IX-B	. 1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc purposes	· •	
3	Amounts set aside for specific charitable projects that satisfy the:		
а		. 3a	
b		. 3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line	4 4	237,525.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment incom		
	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	. 6	237,525.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when qualifies for the section 4940(e) reduction of tax in those years.	calculating	whether the foundation

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Page 9 Form 990-PF (2014) Part XIII Undistributed Income (see instructions) (a) (d) 2014 Corpus Years prior to 2013 2013 Distributable amount for 2014 from Part XI, 1 79,672. Undistributed income, if any, as of the end of 2014 a Enter amount for 2013 only b Total for prior years 20 12 ,20 11 ,20 10 3 Excess distributions carryover, if any, to 2014 116,599. a From 2009 b From 2010 68,026. 144,871. c From 2011 293,732. d From 2012 167,944. e From 2013 791,172. f Total of lines 3a through e Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ ____ 237,525. a Applied to 2013, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions)..... c Treated as distributions out of corpus (Election required - see instructions) , 79,672. d Applied to 2014 distributable amount 157,853. Remaining amount distributed out of corpus . . . 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 indicated below: 949,025. a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b. Taxable 4a from line 2a Taxable amount - see f Undistributed income for 2014 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be Excess distributions carryover from 2009 not 116,599. applied on line 5 or line 7 (see instructions) . . . Excess distributions carryover to 2015. 832,426. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 68,026. a Excess from 2010 . . . 144,871. b Excess from 2011 . . . 293,732. c Excess from 2012 . . .

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d Excess from 2013 . . .

e Excess from 2014 . . .

167,944.

157,853.

Pa	rt XIV Private Op	erating Foundations	(see instructions ar	nd Part VII-A, questi	on 9)	NOT APPLICABLE
1 a	If the foundation has	-			ating	
	foundation, and the ruling	g is effective for 2014, e	nter the date of the ruling		▶∟	
, p	Check box to indicate v				section 4942(j)(3) or 4942(J)(5)
2-	Caton the leaser of the ed	Tax year		Prior 3 years		(-) T-4-1
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
	I or the minimum investment			· ·		
	return from Part X for each year listed					
.						
	85% of line 2a					
С	Qualifying distributions from Part					
а	XII, line 4 for each year listed . Amounts included in line 2c not					
ŭ	used directly for active conduct of exempt activities					
0	Qualifying distributions made					
	directly for active conduct of exempt activities. Subtract line					
	2d from line 2c					
3	Complete 3a, b, or c for the					
а	alternative test relied upon "Assets" alternative test - enter					
_	(1) Value of all assets					
	(2) Value of assets qualifying					
	under section					
h	4942(j)(3)(B)(i) "Endowment" alternative test-					
b	enter 2/3 of minimum invest-					
	ment return shown in Part X,					
	line 6 for each year listed					
C	"Support" alternative test - enter					
	(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 and 5 or more exempt organizations as					
	provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of sup-					
	port from an exempt					
	organization					
Рa		ntary Information (Complete this part	only if the found	ation had \$5.000	or more in assets
1	at any time	during the year -s	ee instructions.)			
	Information Regarding	-		than 20% of the total	d contributions rocci	und by the foundation
a	List any managers of before the close of any	the roundation who r	ev have contributed more	ore than \$5 000). (Se	ee section 507(d)(2))	ved by the roundation
	•	, tan your (out only in a	,	(5.	00 000	
	NONE	11 - 6 - 1 - 1 - 1 - 1 - 1 - 1	400/			
D	List any managers of					y large portion of the
	ownership of a partner	ship of other entity) of	which the foundation	nas a 10% or greater	interest.	
	N/A					
2	Information Regarding	-		• •		
	Check here ► X If t	he foundation only i	makes contributions	to preselected chari	table organizations	and does not accept
				nts, etc (see instruct	tions) to individuals of	or organizations under
	other conditions, comp	olete items 2a, b, c, an	d d			
а	The name, address, a	nd telephone number	or e-mail address of the	ne person to whom ap	plications should be ad	dressed
b	The form in which app	lications should be sul	mitted and informatio	n and materials they	should include	
C	Any submission deadli	nes·		····		
d	Any restrictions or li	mitations on awards	such as by geogra	phical areas, charital	ble fields, kinds of	institutions, or other
_	factors.		, googia	,,		

Part XV Supplementary Information (continued)

Page 11

3 Grants and Contributions Paid Du Recipient Name and address (home or business)	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid dunng the year				
		Ì		
ATCH 14				
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)		
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	1		}	
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		}		
		}	j	
		1		
			1	
		<u> </u>	<u></u>	
Total	<u></u>		▶ 3a	237,500
b Approved for future payment				
			;	
	}		}	1
			}	
		1	}	
			}	
		i.	ļ	
			}	
				ļ
		1		
		1		1
	}			1
		<u> </u>		
Total			▶ 3b	ļ

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Page **12**

er gross amou	ints unless otherwise indicated	Unitela	ated business income	Excluded by	y section 512, 513, or 514	(e) Related or exempt
Program servi	ce revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
_						
f						
g Fees and co	ontracts from government agencies					
Membership o	dues and assessments					
	ngs and temporary cash investments		·	14	9,254.	
	d interest from securities			14	33,492.	
	ome or (loss) from real estate			<u> </u>		
	ced property					
	nanced property				<u> </u>	
	me or (loss) from personal property .					
	nent income			10	157.000	
	om sales of assets other than inventory			18	157,966.	
	r (loss) from special events					
	r (loss) from sales of inventory	<u> </u>	<u> </u>			
	e a					
						
						
				1		
						
•					200 712	
Subtotal. Add Total. Add line worksheet in	columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses	
Subtotal. Add Fotal. Add line worksheet in rt XVI-B	columns (b), (d), and (e) e 12, columns (b), (d), and (e) n line 13 instructions to verify calcu	ulations) to the Ac y for which	complishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal. Add Total. Add line worksheet in rt XVI-B	columns (b), (d), and (e) e 12, columns (b), (d), and (e) n line 13 instructions to verify calcing Relationship of Activities replain below how each activities.	ulations) to the Ac y for which	complishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal. Add Total. Add line worksheet in rt XVI-B	columns (b), (d), and (e) e 12, columns (b), (d), and (e) n line 13 instructions to verify calcing Relationship of Activities replain below how each activities.	ulations) to the Ac y for which	complishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal. Add Total. Add line worksheet in rt XVI-B	columns (b), (d), and (e) e 12, columns (b), (d), and (e) n line 13 instructions to verify calcing Relationship of Activities replain below how each activities.	ulations) to the Ac y for which	complishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal. Add Total. Add line worksheet in rt XVI-B	columns (b), (d), and (e) e 12, columns (b), (d), and (e) n line 13 instructions to verify calcing Relationship of Activities replain below how each activities.	ulations) to the Ac y for which	complishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
oubtotal. Add line worksheet in XVI-B	columns (b), (d), and (e) e 12, columns (b), (d), and (e) n line 13 instructions to verify calcing Relationship of Activities replain below how each activities.	ulations) to the Ac y for which	complishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
ubtotal. Add line worksheet in t XVI-B	columns (b), (d), and (e) e 12, columns (b), (d), and (e) n line 13 instructions to verify calcing Relationship of Activities replain below how each activities.	ulations) to the Ac y for which	complishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
ubtotal. Add line worksheet in t XVI-B	columns (b), (d), and (e) e 12, columns (b), (d), and (e) n line 13 instructions to verify calcing Relationship of Activities replain below how each activities.	ulations) to the Ac y for which	complishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
ubtotal. Add line worksheet in t XVI-B	columns (b), (d), and (e) e 12, columns (b), (d), and (e) n line 13 instructions to verify calcing Relationship of Activities replain below how each activitions.	ulations) to the Ac y for which	complishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
ubtotal. Add line worksheet in t XVI-B	columns (b), (d), and (e) e 12, columns (b), (d), and (e) n line 13 instructions to verify calcing Relationship of Activities replain below how each activitions.	ulations) to the Ac y for which	complishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
ubtotal. Add line worksheet in t XVI-B	columns (b), (d), and (e) e 12, columns (b), (d), and (e) n line 13 instructions to verify calcing Relationship of Activities replain below how each activitions.	ulations) to the Ac y for which	complishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal. Add line worksheet in t XVI-B	columns (b), (d), and (e) e 12, columns (b), (d), and (e) n line 13 instructions to verify calcing Relationship of Activities replain below how each activitions.	ulations) to the Ac y for which	complishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal. Add Total. Add line worksheet in rt XVI-B	columns (b), (d), and (e) e 12, columns (b), (d), and (e) n line 13 instructions to verify calcing Relationship of Activities replain below how each activitions.	ulations) to the Ac y for which	complishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal. Add line worksheet in t XVI-B	columns (b), (d), and (e) e 12, columns (b), (d), and (e) n line 13 instructions to verify calcing Relationship of Activities replain below how each activitions.	ulations) to the Ac y for which	complishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal. Add line worksheet in t XVI-B	columns (b), (d), and (e) e 12, columns (b), (d), and (e) n line 13 instructions to verify calcing Relationship of Activities replain below how each activitions.	ulations) to the Ac y for which	complishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to

Form 99	0-PF ((2014)	THE MULHO	LLEM CRAVENS FOUND	ATION		20-3835	5578	Pa	ge 13
Part 2	KVII			nsfers To and Transac	tions a	nd Relationsh	ips With None	chari	table	-
		Exempt Organ				. <u>.</u>		_		
				ngage in any of the follow				1	Yes	No
			de (other than s	ection 501(c)(3) organizati	ons) or in	section 527, rela	ating to political	ļ		ļ
	-	zations?	_ #		anization (-£				
			_	a noncharitable exempt org					l	х
								1a(1) 1a(2)		X
		transactions						14(2)		
			ncharitable exem	npt organization				15(1)		x
				ole exempt organization				1b(2)		Х
-	•			assets						Х
										Х
										Х
				p or fundraising solicitations						X
				s, other assets, or paid empl						X
				," complete the following						
				es given by the reporting						
				ement, show in column (d)					_	
(a) Line	no	(b) Amount involved	(c) Name of no	oncharitable exempt organization			, transactions, and sha	ring arra	angeme	nts
		N/A			N/A					
										
			<u> </u>							
				_ _						
		 -								
		<u> </u>								
		· 								
					+					
	{									
0- 1-	45-	farmdation describe		liated with, or related to, or						
		•	•	her than section 501(c)(3))		•	nganizations	\Box_{v}	es X	l No
		s," complete the follo	•	ner than section 50 f(c)(c))	o: 111 300ti	0110271			C3 (_ 140
		(a) Name of organization		(b) Type of organization		(c)	Description of relations	ship		
	1					<u> </u>				
				ed this return, including accompanying xpayer) is based on all information of whi			the best of my knowled	ge and	belief, it	is true
Sign		/ ////	从八.	, 4/2/, c	b T	AASHU . A	May the IR:	S discus	ss this	return
Here		سوا ۲۳۰۰			_ <u> </u>	TONNO		reparer		pelow
	Sig	gnature of officer or trustee		Date	Title		(see instruction	18)? [_}	Yes [No
	Щ.	Print/Type preparer's na	me	Preparer's signature		Date	Check If	PTIN		
Daid		1				i	1 2,122, [] ,, [

Form 990-PF (2014)

self-employed P00433870

312-298-2000

Firm's EIN ▶13-4008324

03/26/2015

60606

Paid

Preparer

Use Only Firm's address

CHICAGO,

▶ PRICEWATERHOUSECOOPERS LLP

▶ ONE NORTH WACKER DRIVE

IL

Schedule B

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

Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. Department of the Treasury Internal Revenue Service

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

Employer Identification number

OMB No 1545-0047

THE MULHOLLEM CRAV	ENS FOUNDATION	20-3835578				
Organization type (check o	one)					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated a	as a private foundation				
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a	private foundation				
	501(c)(3) taxable private foundation					
General Rule X For an organizat	e)(7), (8), or (10) organization can check boxes for both the General tion filing Form 990, 990-EZ, or 990-PF that received, during the tey or property) from any one contributor. Complete Parts I and I	e year, contributions totaling \$5,000				
Special Rules						
regulations unde 13, 16a, or 16b, \$5,000 or (2) 2%	ion described in section 501(c)(3) filing Form 990 or 990-EZ that r sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Scheduli and that received from any one contributor, during the year, total of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990 ion described in section 501(c)(7), (8), or (10) filing Form 990 or	ie A (Form 990 or 990-EZ), Part II, line al contributions of the greater of (1) 90-EZ, line 1. Complete Parts I and II.				
contributor, duri	ng the year, total contributions of more than \$1,000 <i>exclusively</i> fational purposes, or the prevention of cruelty to children or animal	for religious, charitable, scientific,				
contributor, durin contributions tota during the year f General Rule ap	ion described in section 501(c)(7), (8), or (10) filing Form 990 on the year, contributions exclusively for religious, charitable, etcaled more than \$1,000. If this box is checked, enter here the totor an exclusively religious, charitable, etc., purpose. Do not complies to this organization because it received nonexclusively religion more during the year.	c, purposes, but no such all contributions that were received plete any of the parts unless the lous, charitable, etc., contributions				
	nat is not covered by the General Rule and/or the Special Rules must answer "No" on Part IV, line 2, of its Form 990; or check the					

Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Employer Identification number 20-3835578

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_	PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192 CARLISLE, KY 40311	\$142,600.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2_	PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192 CARLISLE, KY 40311	\$9,157.	Person X Payroll X Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3_,	PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192 CARLISLE, KY 40311	\$13,196.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
No.	` '		
	Name, address, and ZIP + 4 PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192	Total contributions	Person X Payroll X Noncash (Complete Part II for
4 4	Name, address, and ZIP + 4 PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192 CARLISLE, KY 40311 (b)	\$6,818.	Person X Payroll X (Complete Part II for noncash contributions)
(a)	Name, address, and ZIP + 4 PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192 CARLISLE, KY 40311 (b) Name, address, and ZIP + 4 PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192	\$6,818.	Person Payroll Noncash (Complete Part II for noncash contributions) (d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contribution)

Employer Identification number 20–3835578

Do-d I	Cantalbadasa	(aaa imatriistiana)	Llan dundin	ata anniaa af	Dort Lifeddi	tional cases is accept
Failt	Continuators	(See ilisuucuons).	. Use auplic	ate copies of	raiti ii auu	tional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7 -	PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192 CARLISLE, KY 40311	\$7,615.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192 CARLISLE, KY 40311	\$4,068.	Person X Payroll X Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9-	PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192 CARLISLE, KY 40311	\$7 <u>,696</u> .	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	• •		
No.	Name, address, and ZIP + 4 PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192	Total contributions	Person X Payroll X Noncash (Complete Part II for
10	Name, address, and ZIP + 4 PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192 CARLISLE, KY 40311 (b)	\$	Person X Payroll X (Complete Part II for noncash contributions)
10 (a) No.	Name, address, and ZIP + 4 PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192 CARLISLE, KY 40311 (b) Name, address, and ZIP + 4 PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192	\$	Person X Payroll X Noncash X (Complete Part II for noncash contributions) (d) Type of contribution Person X Payroll X (Complete Part II for X (Co

Employer Identification number

			20-3835578
Part I	Contributors (see instructions). Use duplicate copies of P	Part I if additional space is nee	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_ 13 _	PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192 CARLISLE, KY 40311		Person X Payroll X Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_ 14 _	PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192 CARLISLE, KY 40311	\$4,676.	Person X Payroll X Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_ 15 _	PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192 CARLISLE, KY 40311	- \$6,999. - \$6,999.	Person X Payroll X Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
16	PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192 CARLISLE, KY 40311		Person X Payroll X Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_ 17_	PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192 CARLISLE, KY 40311	- \$18,666. -	Person X Payroll X Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
18	PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192 CARLISLE, KY 40311	\$14 <u>,704</u> .	Person X Payroll X Noncash (Complete Part II for

Employer Identification number

			20-3835578
Part I	Contributors (see instructions). Use duplicate copies of	Part I if additional space is nee	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_ 19_	PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192 CARLISLE, KY 40311	\$5,570.	Person X Payroll X Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	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 Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer Identification number 20-3835578

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	278 SHS AKAMAI TECHNOLOGIES, INC.		
		\$ \$16,983.	_12/10/2014
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	369 SHS BORG WARNER INC COM		
		\$\$.	_12/10/2014
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
44	84 SHS BARD CR INC		
		\$ \$ <u>14,067.</u>	_12/10/2014
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
5	125 SHS COVANCE INC		
		\$\$.	_12/10/2014
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			1
6	257 SHS CENTENE CORP		
6	257 SHS CENTENE CORP	\$\$.	12/10/2014
(a) No. from	257 SHS CENTENE CORP (b) Description of noncash property given	\$\$. (c) FMV (or estimate) (see instructions)	12/10/2014 (d) Date received
(a) No. from	(b)	(c) FMV (or estimate)	(d)

Employer Identification number 20-3835578

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
8	116 SHS GLOBAL PMTS INC GEORGIA		
		\$9,478.	_12/10/2014
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
9	270 SHS GATX CORPORATION		
		\$\$.	_12/10/2014
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_10	310 SHS HEXCEL CORP NEW COM		
·		\$\$12,651.	_12/10/2014
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_ 11	152 SHS INTEGRYS ENERGY GROUP		
		\$ <u>11,488</u> .	_12/10/2014
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate)	(d)
Part I	Description of noncash property given	(see instructions)	Date received
Part I	77 SHS INTERCONTINENTAL EXCHANGE	(see instructions)	Date received
		(see instructions)	
	77 SHS INTERCONTINENTAL EXCHANGE	 \$\$. (c) FMV (or estimate)	_12/10/2014 _(d)

Employer identification number 20-3835578

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_14	205 SHS MONOLITHIC PWR SYSTEMS	-	
		_ \\$10,045.	_12/10/2014
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_15	161 SHS MOOG INC CL A	-	
		\$ <u>11,299</u> .	_12/10/2014
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_16	278 SHS PROTECTIVE LIFE CORP	-	
		\$ 19,379.	_12/10/2014
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_ 17	264 SHS SBA COMMUNICATIONS	-	
		\$29,225.	_12/10/2014
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate)	(d)
Part I		(see instructions)	Date received
Part I	188 SHS SNAP ON INC COM		
		(see instructions)	
	188 SHS SNAP ON INC COM	\$\$	_12/10/2014 _(d)

Employer Identification number 20-3835578

			20 3033370		
Part III	Exclusively religious, charitable, etc.,	contributions to organizations descri	bed in section 501(c)(7), (8), or (10)		
•	that total more than \$1,000 for the ye	ear from any one contributor. Comple	te columns (a) through (e) and the		
	following line entry. For organizations completing Part III, enter the total of <i>exclusively</i> 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 addition	onal space is needed.			
(a) No.	(b) Purpose of aift	(c) Use of gift	(d) Description of how gift is held		

(a) No. from Part I	(b) Purpose of gift	(c) Use		(d) Description of how gift is held		
	(e) Transfer of gift					
	Transferee's name, address, an	nd ZIP + 4	Relatio	nship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
	(e) Transfer of gift					
	Transferee's name, address, an	nd ZIP + 4	Relatio	nship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
		(e) Transf	er of gift	· · · · · · · · · · · · · · · · · · ·		
	Transferee's name, address, an	nd ZIP + 4	Relatio	nship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
		~~~~~				
		(e) Transf	er of gift			
	Transferee's name, address, an	nd ZIP + 4	Relatio	nship of transferor to transferee		

THE MULHOLLEM CRAVENS FOUNDATION FORM 990-PF - PART IV

Kınd of P	roperty		Desc	ription		20.0	Date acquired	Date sold
Gross sale price less penses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		TOTAL CAPITA	AL GAIN DIS	TRIBUTIONS			1,434.	
		MERRILL LYNC			ATTACHE	Р	VARIOUS	VARIOUS
1,998.		1,508.	E. SECORII	1115			490.	
		MERRILL LYNC			ATTACHE	P	VARIOUS	VARIOUS
543,029.		453,639.					89,405.	
		MERRILL LYNC			ATTACHE	Р	VARIOUS	VARIOUS
197,465.		130,840.					66,625.	
		CALIFORNIA F			ASH IN	P	12/10/2014	12/10/20
4.							4.	
		HALYARD HEAD PROPERTY TYD			LIEU	Р	1	11/12/20
5.		1					5.	
		FEDERATED UI			STL CL	P	03/06/2014	09/16/20
3.			21 22001.22				3.	
72,000.		72,000 SHS t PROPERTY TYP 72,000.				P	12/12/2013	06/26/20
TAL GAIN(LO	ss)				•••••		<u> 157,966.</u>	
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20-3835578

# FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

NET INVESTMENT INCOME	6,125. 1,807. 1,469. -147.	9,254.
REVENUE AND EXPENSES PER BOOKS	6,125. 1,807. 1,469. -147.	9,254.
		TOTAL
	INTEREST	
ı	LYNCH LYNCH - U.S. LYNCH - OID LYNCH - AIP	
DESCRIPTION	MERRILL LYNCH MERRILL LYNCH MERRILL LYNCH MERRILL LYNCH	

## FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

	NET	INVESTMENT	INCOME	33,492.	33,492.
REVENUE	AND	EXPENSES	PER BOOKS	33,492.	33,492.
					TOTAL
			DESCRIPTION	MERRILL LYNCH	

ATTACHMENT 2

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	CHARITABLE PURPOSES		
	ADJUSTED NET INCOME		
	NET INVESTMENT INCOME		
	REVENUE AND EXPENSES PER BOOKS	44.	44.
I - LEGAL FEES			TOTALS
FORM 990PF, PART I - LEGAL FEES	DESCRIPTION	MEYER CAPEL	

ATTACHMENT 3

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FEES	
ACCOUNTING	
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90PF,	
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CHARITABLE PURPOSES		
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	2,600.	2,600.
REVENUE AND EXPENSES PER BOOKS	2,600.	2,600.
		TOTALS
DESCRIPTION	PWC	

ATTACHMENT 4

20-3835578

ATTACHMENT 5

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

REVENUE AND EXPENSES PER BOOKS

NET INVESTMENT INCOME

11,224.

MERRILL LYNCH FEES

DESCRIPTION

11,224.

TOTALS

11,224.

11,224.

FORM 990PF, PART I - TAXES

REVENUE

AND

EXPENSES

PER_BOOKS_

FOREIGN TAXES

DESCRIPTION

413.

TOTALS

413.

20-3835578

ATTACHMENT

- OTHER EXPENSES PART I FORM 990PF, REVENUE AND

EXPENSES PER BOOKS

15. 10.

25.

15.

CHARITABLE PURPOSES

TOTALS

ILLINOIS CHARITY BUREAU FUND ILLINOIS SECRETARY OF STATE

DESCRIPTION

25.

20-3835578

ı	1
OBLIGATIONS	
STATE	
AND	
- U.S.	
II	
PART	
990PF,	
FORM	

ENT 8	щ
ATTACHMENT	ENDING BOOK VALUE
	DESCRIPTION

US OBLIGATIONS TOTAL

MERRILL LYNCH

8 .I.N.	ENDING <u>EMV</u>	168,627.	168,627.
ATT. ACHMENT: 8	ENDING BOOK VALUE	163,488.	163,488.

- CORPORATE STOCK PART II FORM 990PE,

DESCRIPTION

MERRILL LYNCH - MUTUAL FUNDS MERRILL LYNCH - EQUITIES

9	
ATTACHMENT	
A	1

20-3835578

BOOK VALUE ENDING

ENDING FMV

549,087. 752,779.

530,262. 686,379.

1,301,866.

1,216,641.

TOTALS

FORM 990PF, PART II - CORPORATE BONDS

DESCRIPTION

ENDING BOOK VALUE

ENDING FMV

20-3835578

ATTACHMENT 10

MERRILL LYNCH

TOTALS

91674J 1435 3/26/2015 12:15:33 AM V 14-4F

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION AMOUNT

NONDIVIDEND DISTRIBUTIONS 682.

TOTAL 682.

## FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

<u>DESCRIPTION</u> <u>AMOUNT</u>

PREMIUM AMORTIZATION IRS PAYMENTS

OTHER DECREASES

288.

5,466.

598.

TOTAL

6,352.

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

20-3835578

ATTACHMENT 13

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER

WEEK DEVOTED TO POSITION

C/O PAUL B MULHOLLEM JR. PAUL B. MULHOLLEM, JR. P.O. BOX 192 CARLISLE, KY 40311

DIRECTOR

C/O PAUL B MULHOLLEM JR. VALERIE K. CRAVENS P.O. BOX 192

CARLISLE, KY 40311

DIRECTOR

LEXINGTON, KY 40502 SYLVIA J. CRAVENS 141 KENTUCKY AVE.

DIRECTOR

ATTACHMENT 14

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURROSE OF GRANT OR CONTRIBUTION A	AMOUNT
COMMONWEALTH FUND FOR KET	NONE PC	TO FURTHER THE MISSION OF THE DONEE	10,000.
NATIONAL FFA FOUNDATION	NONE PC	TO FURTHER THE MISSION OF THE DONEE	50,000.
NICHOLAS COUNTY HISTORICAL SOCIETY	NONE PC	TO FURTHER THE MISSION OF THE DONEE	25,000.
PARIS-BOURBON COUNTY YMCA	NONE PC	TO FURTHER THE MISSION OF THE DONEE	25,000.
THE CARNEGIE CENTER	NONE PC	TO FURTHER THE MISSION OF THE DONEE	.000.
CARLE DEV FOUNDATION	NONE PC	TO FURTHER THE MISSION OF THE DONEE	10,000.

FOUNDATION	
CRAVENS	
MULHOLLEM	
THE	

20-3835578

ATTACHMENT 14 (CONT'D)

12:15:33 AM

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GRANTS
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PART
990PF,
FORM

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
KY STATE FFA FOUNDATION	NONE PC	TO FURTHER THE MISSION OF THE DONEE	10,000.
UNIVERSITY OF KENTUCKY	NONE PC	TO FURTHER THE MISSION OF THE DONEE	25,000.
HAITI PARTNERS	NONE PC	TO FURTHER THE MISSION OF THE DONEE	5,000.
A BETTER COMMUNITY AG FUND	NONE PC	TO FURTHER THE MISSION OF THE DONEE	12,500.
WUKY	NONE PC	TO FURTHER THE MISSION OF THE DONEE	5,000.
NORIH DAKOTA MUSEUM OF ART	NONE PC	TO FURTHER THE MISSION OF THE DONEE	10,000.

237,500.

TOTAL CONTRIBUTIONS PAID

Schedule O (Form 990		Page 2
Name of the organization		
THE MULHOLLE	M CRAVENS FOUNDATION	20-3835578
•		ATTACHMENT 15
SCHEDULE B,	PART III - SECTION 501(C)(7),(8), OR (10) ORGANIZATION	ONS
THAT RECEIVE	ED MORE THAN \$1,000 IN CHARITABLE GIFTS DURING THE YEAR	<u>AR</u>
(A)		
NO. FROM		
PART I (B)	PURPOSE OF GIFT	
2		
_		
(C)	USE OF GIFT	
(D)	DESCRIPTION OF HOW GIFT IS HELD	
107		
(E)	TRANSFER OF GIFT	
(11)	THE COLUMN OF WITH	
	RECIPIENT'S NAME, ADDRESS, AND ZIP CODE	
	RECTITENT S MANE, ADDRESS, AND BIT CODE	<del></del>

Name of the organization Employer identification number 20-3835578 THE MULHOLLEM CRAVENS FOUNDATION ATTACHMENT 15 (CONT'D)

SCHEDULE B, PART III - SECTION 501(C)(7),(8), OR (10) ORGANIZATIONS

THAT_	RECEIVED	MORE THAN \$1,000 IN CHARITABLE GIFTS DURING THE YEAR	
(A)			
NO. I	FROM		
PART I	I (B)	PURPOSE OF GIFT	
3	3		
	(C)	USE OF GIFT	
	(D)	DESCRIPTION OF HOW GIFT IS HELD	
	(E)	TRANSFER OF GIFT	
		RECIPIENT'S NAME, ADDRESS, AND ZIP CODE	
	,		

Name of the organization Employer identification number 20-3835578 THE MULHOLLEM CRAVENS FOUNDATION ATTACHMENT 15 (CONT'D) SCHEDULE B, PART III - SECTION 501(C)(7),(8), OR (10) ORGANIZATIONS THAT RECEIVED MORE THAN \$1,000 IN CHARITABLE GIFTS DURING THE YEAR (A) NO. FROM PART I PURPOSE OF GIFT (B) 4 (C) USE OF GIFT DESCRIPTION OF HOW GIFT IS HELD (D) (E) TRANSFER OF GIFT RECIPIENT'S NAME, ADDRESS, AND ZIP CODE RELATIONSHIP TO TRANSFEREE

Name of the organization Employer identification number THE MULHOLLEM CRAVENS FOUNDATION 20-3835578 ATTACHMENT 15 (CONT'D) SCHEDULE B, PART III - SECTION 501(C)(7),(8), OR (10) ORGANIZATIONS THAT RECEIVED MORE THAN \$1,000 IN CHARITABLE GIFTS DURING THE YEAR (A) NO. FROM PART I (B) PURPOSE OF GIFT 5 (C) USE OF GIFT DESCRIPTION OF HOW GIFT IS HELD (D) (E) TRANSFER OF GIFT RECIPIENT'S NAME, ADDRESS, AND ZIP CODE

Name of	the c	organıza	ation	Employer Identification number
THE N	MUL	HOLL	EM CRAVENS FOUNDATION	20-3835578
•				ATTACHMENT 15 (CONT'D)
THAT			PART III ~ SECTION 501(C)(7),(8), OR (10) ORGANIZATIONS VED MORE THAN \$1,000 IN CHARITABLE GIFTS DURING THE YEAR	
(A)				
NO.		(B)	PURPOSE OF GIFT	
6	5			
		(C)	USE OF GIFT	
		(D)	DESCRIPTION OF HOW GIFT IS HELD	
		(E)	TRANSFER OF GIFT	
			RECIPIENT'S NAME, ADDRESS, AND ZIP CODE	
		,		

Employer Identification number Name of the organization THE MULHOLLEM CRAVENS FOUNDATION 20-3835578 ATTACHMENT 15 (CONT'D)

SCHEDULE B, PART III - SECTION 501(C)(7),(8), OR (10) ORGANIZATIONS THAT RECEIVED MORE THAN \$1,000 IN CHARITABLE GIFTS DURING THE YEAR

(A) NO. FROM PART I (B)

PURPOSE OF GIFT

7

USE OF GIFT (C) DESCRIPTION OF HOW GIFT IS HELD (D) (E) TRANSFER OF GIFT RECIPIENT'S NAME, ADDRESS, AND ZIP CODE

Name of the	organization		Employer identification number
THE MU	LHOLLEM	CRAVENS FOUNDATION	20-3835578
•			ATTACHMENT 15 (CONT'D)
SCHEDU	LE B, PA	ART III - SECTION 501(C)(7),(8), OR (10) C	RGANIZATIONS
THAT R	ECEIVED	MORE THAN \$1,000 IN CHARITABLE GIFTS DURI	NG THE YEAR
(A)			
NO. FR	.OM		
PART I	(B)	PURPOSE OF GIFT	
8			
	(C)	USE OF GIFT	
	453		
	(D)	DESCRIPTION OF HOW GIFT IS HELD	
	(E)	TRANSFER OF GIFT	
	(E)	TRANSFER OF GIFT	
		RECIPIENT'S NAME, ADDRESS, AND ZIP	CODE
	,		
		DELAGIOUED DO DOMOGRADES	

Name of the organization
THE MULHOLLEM CRAVENS FOUNDATION
20-3835578

ATTACHMENT 15 (CONT'D)

SCHEDULE B, PART III - SECTION 501(C)(7),(8), OR (10) ORGANIZATIONS
THAT RECEIVED MORE THAN \$1,000 IN CHARITABLE GIFTS DURING THE YEAR

SCHEDULE B, PART III - SECTION 501(C)(7),(8), OR (10) ORGANIZATIONS

THAT RECEIVED MORE THAN \$1,000 IN CHARITABLE GIFTS DURING THE YEAR

(A)

NO. FROM
PART I (B)

PURPOSE OF GIFT

(C)

USE OF GIFT

(D)

DESCRIPTION OF HOW GIFT IS HELD

(E)

TRANSFER OF GIFT

RECIPIENT'S NAME, ADDRESS, AND ZIP CODE

Name of the organization Employer Identification number 20-3835578 THE MULHOLLEM CRAVENS FOUNDATION ATTACHMENT 15 (CONT'D) SCHEDULE B, PART III - SECTION 501(C)(7),(8), OR (10) ORGANIZATIONS THAT RECEIVED MORE THAN \$1,000 IN CHARITABLE GIFTS DURING THE YEAR (A) NO. FROM PART I PURPOSE OF GIFT (B) 10 USE OF GIFT (C) DESCRIPTION OF HOW GIFT IS HELD (D) (E) TRANSFER OF GIFT RECIPIENT'S NAME, ADDRESS, AND ZIP CODE RELATIONSHIP TO TRANSFEREE

Name of the organization Employer Identification number 20-3835578 THE MULHOLLEM CRAVENS FOUNDATION ATTACHMENT 15 (CONT'D) SCHEDULE B, PART III - SECTION 501(C)(7),(8), OR (10) ORGANIZATIONS THAT RECEIVED MORE THAN \$1,000 IN CHARITABLE GIFTS DURING THE YEAR (A) NO. FROM PART I (B) PURPOSE OF GIFT 11 (C) USE OF GIFT DESCRIPTION OF HOW GIFT IS HELD (D) TRANSFER OF GIFT (E) RECIPIENT'S NAME, ADDRESS, AND ZIP CODE RELATIONSHIP TO TRANSFEREE

RECIPIENT'S NAME, ADDRESS, AND ZIP CODE

Name of the organization
THE MULHOLLEM CRAVENS FOUNDATION

Employer Identification number

20-3835578 ATTACHMENT 15 (CONT'D)

SCHEDULE B, PART III - SECTION 501(C)(7),(8), OR (10) ORGANIZATIONS THAT RECEIVED MORE THAN \$1,000 IN CHARITABLE GIFTS DURING THE YEAR

(A)
NO. FROM
PART I (B)

PURPOSE OF GIFT

13

(C) USE OF GIFT

(D) DESCRIPTION OF HOW GIFT IS HELD

(E) TRANSFER OF GIFT

RECIPIENT'S NAME, ADDRESS, AND ZIP CODE

RECIPIENT'S NAME, ADDRESS, AND ZIP CODE

Name of the organization
THE MULHOLLEM CRAVENS FOUNDATION
Employer Identification number
20-3835578
ATTACHMENT 15 (CONT'D)

SCHEDULE B, PART III - SECTION 501(C)(7),(8), OR (10) ORGANIZATIONS THAT RECEIVED MORE THAN \$1,000 IN CHARITABLE GIFTS DURING THE YEAR

(A) NO. FROM PART I (B)

(E)

PURPOSE OF GIFT

15

(C) USE OF GIFT

(D) DESCRIPTION OF HOW GIFT IS HELD

TRANSFER OF GIFT
RECIPIENT'S NAME, ADDRESS, AND ZIP CODE

Name of the organization
THE MULHOLLEM CRAVENS FOUNDATION

Schedule O (Form 990 or 990-EZ) 2014

Employer Identification number
20-3835578
ATTACHMENT 15 (CONT'D)

SCHEDULE B, PART III - SECTION 501(C)(7),(8), OR (10) ORGANIZATIONS THAT RECEIVED MORE THAN \$1,000 IN CHARITABLE GIFTS DURING THE YEAR

(A)

NO. FROM

PART I (B)

PURPOSE OF GIFT

16

(C) USE OF GIFT

(D) DESCRIPTION OF HOW GIFT IS HELD

(E) TRANSFER OF GIFT

RECIPIENT'S NAME, ADDRESS, AND ZIP CODE

Name of the organization Employer identification number 20-3835578 THE MULHOLLEM CRAVENS FOUNDATION ATTACHMENT 15 (CONT'D) SCHEDULE B, PART III - SECTION 501(C)(7),(8), OR (10) ORGANIZATIONS THAT RECEIVED MORE THAN \$1,000 IN CHARITABLE GIFTS DURING THE YEAR (A) NO. FROM PART I PURPOSE OF GIFT (B) 17 (C) USE OF GIFT (D) DESCRIPTION OF HOW GIFT IS HELD (E) TRANSFER OF GIFT RECIPIENT'S NAME, ADDRESS, AND ZIP CODE

Schedule O	(Form 990 or 9	990-EZ) 2014		1	Page 2
Name of the	organization		Employer identif	ication number	
THE MUI	LHOLLEM	CRAVENS FOUNDATION	20-383	5578	
•			ATTACHMENT	15 (CONT'D	
		RT III - SECTION 501(C)(7),(8), OR (10) ORGANIZATIONS MORE THAN \$1,000 IN CHARITABLE GIFTS DURING THE YEAR	S 		
(A)	OM				
PART I	(B)	PURPOSE OF GIFT			
18					
	(C)	USE OF GIFT			
	(D)	DESCRIPTION OF HOW GIFT IS HELD			
	(E)	TRANSFER OF GIFT			
		RECIPIENT'S NAME, ADDRESS, AND ZIP CODE			
	,				

Schedule O (Form 990 or 990-E	EZ) 2014	Page 2
Name of the organization		Employer identification number
THE MULHOLLEM CRA	AVENS FOUNDATION	20-3835578
•		ATTACHMENT 15 (CONT'D)
·	III - SECTION 501(C)(7),(8), OR (10) ORGA	
(A) NO. FROM		
PART I (B)	PURPOSE OF GIFT	· · · · · · · · · · · · · · · · · · ·
19		
(C)_	USE OF GIFT	
(D)	DESCRIPTION OF HOW GIFT IS HELD	
(E)	TRANSFER OF GIFT	
	RECIPIENT'S NAME, ADDRESS, AND ZIP COD	E

## SCHEDULE D (Form 1041)

**Capital Gains and Losses** 

► Attach to Form 1041, Form 5227, or Form 990-T.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

Information about Schedule D and its separate instructions is at www.irs.gov/form1041.

OMB No 1545-0092

Department of the Treasury Internal Revenue Service

THE MULHOLLEM CRAVENS FOUNDATION

Employer identification number

20-3835578

Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less See instructions for how to figure the amounts to enter on (g) Adjustments (h) Gain or (loss) Subtract column (e) (d) the lines below. (e) to gain or loss from Form(s) 8949, Part I. from column (d) and combine the result with Proceeds This form may be easier to complete if you round off cents (sales price) (or other basis) line 2, column (g) column (g) to whole dollars 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b, 1b Totals for all transactions reported on Form(s) 8949 1,508. 1,998. 490. Totals for all transactions reported on Form(s) 8949 12 12. Totals for all transactions reported on Form(s) 8949 72,000. 72,000. Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 . . . . . . . . 4 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts . . . . . . . . . 5 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2013 Capital Loss 6 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). Enter here and on 502. Long-Term Capital Gains and Losses - Assets Held More Than One Year See instructions for how to figure the amounts to enter on (h) Gain or (loss) Subtract column (e) Adjustments the lines below. (d) (e) from column (d) and Proceeds to gain or loss from Form(s) 8949, Part II, combine the result with This form may be easier to complete if you round off cents (sales price) (or other basis) line 2, column (g) column (g) to whole dollars. 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b. 8b Totals for all transactions reported on Form(s) 8949 543,029. 453,639. 15. 89,405. Totals for all transactions reported on Form(s) 8949 197,465. 130,840. 66,625. Totals for all transactions reported on Form(s) 8949 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 . . . . . . . . . . . . . . . . . 11 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts. . . . . . . . . . 12 1,434. 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2013 Capital Loss 15

Schedule D (Form 1041) 2014

157,464.

Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h). Enter here and on

Page 2 Schedule D (Form 1041) 2014

Pai	Summary of Parts I and II  Caution: Read the instructions before completing this parts.	art.	(1) Beneficiaries' (see instr.)	(2) Estate's or trust's	(3) Total
17	Net short-term gain or (loss)	17_			502.
18	Net long-term gain or (loss):				
а	Total for year	18a			157,464.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht)	18b			
С	28% rate gain	18c			
	Total net gain or (loss). Combine lines 17 and 18a ▶	19			157,966.
			000 T D 111 1	1 151 10 116	

Note: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a) If lines 18a and 19, column (2), are net gains, go to Part V, and do not complete Part IV If line 19, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as necessary

## Part IV Capital Loss Limitation

20 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of.

20 a The loss on line 19, column (3) or b \$3,000 . . . . . . . . . Note: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the Capital Loss Carryover Worksheet in the instructions to figure your capital loss carryover.

## **Tax Computation Using Maximum Capital Gains Rates**

Form 1041 filers. Complete this part only if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero. Caution: Skip this part and complete the Schedule D Tax Worksheet in the instructions if

- Either line 18b, col (2) or line 18c, col. (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.

Form 990-T trusts. Complete this part only if both lines 18a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the Schedule D Tax Worksheet in the instructions

if ei	ther line 18b, col. (2) or line 18c, col. (2) is more than zero				
21	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	21			
22	Enter the smaller of line 18a or 19 in column (2)				
	but not less than zero				
23	Enter the estate's or trust's qualified dividends				
	from Form 1041, line 2b(2) (or enter the qualified	l i		1	
	dividends included in income in Part I of Form 990-T) 23				
24	Add lines 22 and 23				
25	If the estate or trust is filing Form 4952, enter the				
	amount from line 4g; otherwise, enter -0 ▶ 25				
26	Subtract line 25 from line 24. If zero or less, enter -0-	26			
27	Subtract line 26 from line 21 If zero or less, enter -0	27		]	
28	Enter the smaller of the amount on line 21 or \$2,500	28			
29	Enter the smaller of the amount on line 27 or line 28	29	<u> </u>		
30	Subtract line 29 from line 28. If zero or less, enter -0 This amount is taxed at	0% . ,		30	
31	Enter the smaller of line 21 or line 26	31		j	
32	Subtract line 30 from line 26	32			
33	Enter the smaller of line 21 or \$12,150	33			
34	Add lines 27 and 30	34	·		
35	Subtract line 34 from line 33. If zero or less, enter -0	35		1	
36	Enter the smaller of line 32 or line 35	36			
37	Multiply line 36 by 15%			37_	
38	Enter the amount from line 31	38			
39	Add lines 30 and 36	39		ļ	
40	Subtract line 39 from line 38. If zero or less, enter -0	40			
41	Multiply line 40 by 20%	• • • •		41	
42	Figure the tax on the amount on line 27. Use the 2014 Tax Rate Schedule for Estates				
	and Trusts (see the Schedule G instructions in the instructions for Form 1041)	42			
43	Add lines 37, 41, and 42	43		1	
44	Figure the tax on the amount on line 21. Use the 2014 Tax Rate Schedule for Estates				
	and Trusts (see the Schedule G instructions in the instructions for Form 1041)	44			
45	Tax on all taxable income. Enter the smaller of line 43 or line 44 here and	on Fo	rm 1041, Schedule		
	G line 1a (or Form 990-T line 36)		<b>•</b>	45	1

## Sales and Other Dispositions of Capital Assets

▶ Information about Form 8949 and its separate instructions is at www.irs.gov/form8949.

OMB No 1545-0074

Department of the Treasury Internal Revenue Service

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Attachment Sequence No

Name(s) shown on return THE MULHOLLEM CRAVENS FOUNDATION Social security number or taxpayer identification number 20-3835578

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments your bought in 2014 or later)

Short-Term. Transactions involving capital assets you held 1 year or less are short-term. For long-term transactions, see page 2.

X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

Note. You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 1a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

L	(B) Short-term transactions re (C) Short-term transactions no		-		reported to the IF	RS		
1		(b) Date acquired	(c)	(d)	(e) Cost or other basis See the	If you enter an a enter a coo	any, to gain or loss. mount in column (g), de in column (f) rate instructions.	(h) Gain or (loss).
	(Example 100 sh XYZ Co)	(Mo , day, yr )	disposed (Mo , day, yr )	(sales pnce) (see instructions)	Note below and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	Subtract column (e) from column (d) and combine the result with column (g)
М	ERRILL LYNCH #04A12							
	S/T - SEE ATTACHED	VARIOUS	VARIOUS	1,998.	1,508.			490.
_								
_								
2	Totals. Add the amounts in column act negative amounts) Enter ear your Schedule D, line 1b (if Box A Box B above is checked), or line 1	ch total here an A above is check	id include on red), line 2 (if	1,998.	1,508.			490.

Note. If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis See Column (g) in the separate instructions for how to figure the amount of the adjustment

## Form 8949

## Sales and Other Dispositions of Capital Assets

▶ Information about Form 8949 and its separate instructions is at www.irs.gov/form8949.

2014

Department of the Treasury Internal Revenue Service

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Attachment Sequence No 12A

THE MULHOLLEM CRAVENS FOUNDATION

Social security number or taxpayer identification number

20-3835578

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments your bought in 2014 or later)

Part I

**Short-Term.** Transactions involving capital assets you held 1 year or less are short-term. For long-term transactions, see page 2.

**Note.** You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 1a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss. 1 If you enter an amount in column (g), (e) enter a code in column (f) Cost or other basis See the (d) (c) (b) (a) Gain or (loss). See the separate instructions. Date sold or Proceeds Description of property Date acquired Subtract column (e) Note below and (sales price) disposed (Example 100 sh XYZ Co ) (Mo, day, yr) see Column (e) (g) from column (d) and (see instructions) (Mo, day, yr) combine the result in the separate Code(s) from Amount of instructions with column (a) instructions adjustment CALIFORNIA RESOURCES CORP SHS - CASH IN 12/10/2014 12/10/2014 4. 4. HALYARD HEALTH INC SHS - CASH IN LIEU 11/12/2014 11/12/2014 5. 5. FEDERATED ULTRASHORT 03/06/2014 09/16/2014 3. BOND FUND INSTL CL З. 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts) Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked)

Note. If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

## Sales and Other Dispositions of Capital Assets

▶ Information about Form 8949 and its separate instructions is at www.irs.gov/form8949.

OMB No 1545-0074

Attachment Sequence No 12A

Department of the Treasury Internal Revenue Service Name(s) shown on return ▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Social security number or taxpayer Identification number

THE MULHOLLEM CRAVENS FOUNDATION

20-3835578

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments your bought in 2014 or later)

Short-Term. Transactions involving capital assets you held 1 year or less are short-term. For long-term transactions, see page 2.

Note. You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 1a; you are not required to report these transactions on Form 8949 (see instructions). You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss. If you enter an amount in column (g) (e) Cost or other enter a code in column (f) (c) (d) (a) Gain or (loss). (b) basis See the See the separate instructions. Date sold or Proceeds Description of property Date acquired Subtract column (e) Note below and disposed (sales price) (Example 100 sh XYZ Co ) (Mo, day, yr) from column (d) and see Column (e) (f) (a) (Mo, day, yr) (see instructions) combine the result in the separaté Code(s) from Amount of instructions with column (g) instructions adjustment 72,000 SHS U.S. 12/12/2013 06/26/2014 TREASURY BILL 72,000. 72,000. 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtr-

act negative amounts) Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked)▶

72,000. 72,000

Note. If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Name(s) shown on return. Name and SSN or taxpayer identification no not required if shown on other side.

THE MULHOLLEM CRAVENS FOUNDATION

Social security number or taxpayer identification number 20-3835578

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later)

Part II Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

**Note.** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

[X] (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the	If you enter an a enter a co	any, to gain or loss. amount in column (g), de in column (f) irate instructions.	(h) Gain or (loss). Subtract column (e) from column (d) and
(Example 100 sh XYZ Co)	(Mo , day, yr )	disposed (Mo , day, yr )	(sales price) (see instructions)	Note below and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
MERRILL LYNCH #04A12 -					_		
L/T - SEE ATTACHED	VARIOUS	VARIOUS	543,029.	453,639.	W	15.	89,405
	<del> </del>						

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked). ■

543,029. 453,639.

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Page 2

Form 8949 (2014)

Attachment Sequence No 12A

Name(s) shown on return. Name and SSN or taxpayer identification no not required if shown on other side

Social security number or taxpayer identification number

THE MULHOLLEM CRAVENS FOUNDATION

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B Either may show your basis (usually your cost) even if your broker did not report it to the IRS Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later)

Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
- (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- (F) Long-term transactions not reported to you on Form 1099-B

1 (a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired	(c) Date sold or	(d) Proceeds (sales price)	(e) Cost or other basis See the	If you enter an a enter a cod	ny, to gain or loss. mount in column (g), le in column (f) rate instructions.	(h) Gain or (loss). Subtract column (e) from column (d) and
(Example 100 SIT XTZ Co )	(Mo , day, yr )	(Mo , day, yr )	(see instructions)	Note below and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
MERRILL LYNCH #04A12 -							
L/T - SEE ATTACHED	VARIOUS	VARIOUS	197,465.	130,840.		<del></del>	66,625.
		<u> </u>				<del></del>	
	<del> </del>						
	<del> </del>	<del> </del>					<del> </del>
	<del> </del>	ļ		ļ			
	ļ						
	<u> </u>						
2 Totals. Add the amounts in col (subtract negative amounts). E include on your Schedule D, lin checked), line 9 (if Box E above (if Box E above is checked)	nter each tota ne 8b (if Box I	al here and D above is	197,465.	130,840.			66, 625,

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Account No. 874-04A12

Taxpayer No. 20-3835578

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# THE MULHOLLEM CRAVENS

# 2014 ANNUAL STATEMENT SUMMARY

The following sections are provided to facilitate your review and the preparation of your return

The 2014 Proceeds from Broker and Barter Exchange Transactions section includes both sales of positions for "covered securities" and "noncovered securities." A covered security 1, 2012, and Option securities when the purchase date of the security occurred within the following timeline: Equities acquired on or after January 1, 2014. Legislation requires reporting the gross proceeds of the sales of "covered" and "noncovered" securities and the adjusted cost basis (where available) but the adjusted basis will not be transmitted to the IRS.

In calculating gain (loss), unless otherwise noted, it was assumed that the oldost position was liquidated first, and that you have made an election to amortize the premium paid on the purchase of taxable bonds. Under the Cost Basis Reporting Regulations, brokers need not track wash sale activity for substantially identical securities, transactions across accounts, or between covered and noncovered securities. However, you as a taxpayer still have to track and report wash sales as you have in the past which would include all of the aforementioned transaction types. Securities distributed from a retirement account reflect the tax basis on the date of distribution. Other methods for calculating gain (loss) are available. The cost basis for most Original Issue Discount ("OID") obligations includes the accretion of OID.

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1099-B	2014 PROCEEDS		BROKER &	BARTER EXCH	FROM BROKER & BARTER EXCHANGE TRANSACTIONS	NS	
1a. Description of Property	1b. Date of 1c. Date of Salc Acquisition or Exchange		1d. Amount	1e. Cost Basis	1f. IRS 1e. Cost Basis Code 1g. Adjustments	Gain or (Loss)	Remarks
SHORT TERM CAPITAL GAINS AND LOSSES - 1099-B Line :	LOSSES - 1099	-B Line 2					
COVERED TRANSACTIONS-1099-B Line 3, Cost basis reported to IRS (Code A)	ine 3, Cost basi	's reported to IF	RS (Code A)				
CDK GLOBAL INC SHS Cash/Lieu	CUSIP Number 12508E101 12/19/13 10/10/14	<i>12508E101</i> 10/10/14	8.67	10.03	00:00	(1.36)	
DIGITAL RLTY TR INC 21.0000 Salo	CUSIP Number 253868103 12/19/13 11/10/14	<i>253868103</i> 11/10/14	1,444,14	961.40	0.00	482.74	
FEDERATED ULTRASHORT	CUSIP Number 31428Q747	31428Q747					
BOND FUND INSTECE .2490 Sale	08/29/14	09/16/14	2.29	2.29	00:00	00'0	
LORD ABBETT INFLATION	CUSIP Number 54400U403	54400U403					
rocuseu runu c.r. 1960 Sale	08/29/14	09/16/14	2.72	2.74	0.00	(0.02)	

0.00

8.0

1.54

1.54

09/16/14

09/02/14

880208400

CUSIP Number

TEMPLETON GLBL BOND FD

.1300 Sale

4812A4351

CUSIP Number

JP MORGAN STRATEGIC

INCOME OPP FUND

0.76 1.32 0.32

888

39.08 38.52 12.96

39.84 39.84 13.28

09/16/14 09/16/14 09/16/14

01/17/14 02/20/14 03/19/14

Sale Sale Sale

3.0000



Account No. 874-04A12

Taxpayer No. 20-3835578

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# THE MULHOLLEM CRAVENS

THE MULHULLEM CKAVENS							
		2014 A	<b>INNUAL STA</b>	<b>NNUAL STATEMENT SUMMARY</b>	MMARY		
1099-B	2014 PRC	CEEDS FROM	A BROKER &	BARTER EXCH	2014 PROCEEDS FROM BROKER & BARTER EXCHANGE TRANSACTIONS	NS	
1a. Description of Property	1b. Date of Acquisition	1c. Date of Sale or Exchange	1d. Amount	1e. Cost Basis	1f. IRS Code 1g. Adjustments	Gam or (Loss)	Remarks
TEMPLETON GLBL BOND FD	CUSIP Number	or 880208400		i .			
ADV CL 3.0000 Sale 2.0000 Sale	03/19/14	09/16/14	39.84 26.56	38.43	0.00	1.41	
	05/19/14 05/19/14	09/16/14 09/16/14	13.28 26.56	12.96 26.30	0.00	0.26	
		09/16/14 09/16/14	26.56 13.28	26.56 13.21	0000	0.00 70.0	
	07/17/14 08/19/14	09/16/14 09/16/14	26.56 13.28	26.60 13.28	0.00	(0.04) 0.00	
	08/19/14 08/19/14	09/16/14 09/16/14	0.76 26.57	0.76 26.55	0.00	0.00	
	09/18/13 10/17/13	09/16/14 09/16/14	39.84 39.84	38.82 39.33	0.00	1.02 0.51	
1.0000 Sale 3.0000 Sale	11/19/13	09/16/14 09/16/14	13.28 39.84	12.95 39.06	0.00	0.33 0.78	
	12/18/13 12/18/13	09/16/14 09/16/14	13.28 79.68	13.00	00:00	0.28	
.5630 Sale	09/17/14	12/26/14	6.98	7.47	0.00	(0.49)	
Security Subtotal			538.95	529.88	0.00	9.07	
Covered Short Term Capital Gains and Losses Subtotal	nd Losses Sul	ototal	1,998.31	1,507.88	0.00	490.43	
NET SHORT TERM CAPITAL GAINS AND LOSSES	AND LOSSES		1,998.31	1,507.88	0.00	490.43	
LONG TERM CAPITAL GAINS AND LOSSES - 1099-B Line 2	.OSSES - 1099	3-B Line 2					
COVERED TRANSACTIONS-1099-B Line 3, Cost basis reported to	ine 3, Cost ba	isis reported to	IRS (Code D)				
AKAMAI TECHNOLOGIES INC 155.0000 Sale 5.0000 Sale	CUSIP Number 12/27/12 12/18/13	er <i>009717101</i> 12/19/14 12/19/14	9,811.61 316.51	6,387.53 232.19	00:00	3,424.08 84.32	
Security Subtotal			10,128.12	6,619.72	00.00	3,508.40	
ALTRIA GROUP INC 35.0000 Sale	CUSIP Number 06/07/13	ər 02209S103 12/26/14	1,768.86	1,254.93	0.00	513.93	
ABBVIE INC SHS 31.0000 Sale	CUSIP Number 06/07/13	er 00287Y109 12/26/14	2,070.75	1,355.48	0.00	715.27	

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Taxpayer No.

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		2014 A	NNUAL STA	2014 ANNUAL STATEMENT SUMMARY	MMARY		
1099-B	2014 PRO(	CEEDS FROM	BROKER &	BARTER EXCH	2014 PROCEEDS FROM BROKER & BARTER EXCHANGE TRANSACTIONS	NS	
1a. Description of Property	1b. Date of Acquisition	1c. Date of Sale or Exchange	1d. Amount	1e. Cost Basis	1f. IRS Code 1g. Adjustments	Gam or (Loss)	Remarks
AMN ELEC POWER CO 48.0000 Sale	CUSIP Number 12/19/13	r 025537101 12/26/14	2,986.98	2,210.88	0.00	776.10	:
BORG WARNER INC COM 353.0000 Salo 16.0000 Sale	CUSIP Number 12/27/12 12/18/13	r 099724106 12/19/14 12/19/14	19,430.38 880.70	12,307,59	00:0	7,122.79	
Security Subtotal			20,311.08	13,196.48	0.00	7,114.60	
BARD C R INC 2.0000 Sale	CUSIP Number 12/18/13	r <i>067383109</i> 12/19/14	340.36	267.52	0.00	72.84	
BRISTOL-MYERS SQUIBB CO 130,0000 Sale 233,0000 Sale	CUSIP Number 06/07/13 12/19/13	r 110122108 12/26/14 12/26/14	7,771.24 13,928.46	6,112.04	00:0	1,659.20 1,333.51	
Security Subtotal			21,699.70	18,706.99	0.00	2,992.71	
COVANCE INC 1.0000 Sale	CUSIP Number 12/18/13	r <i>222816100</i> 12/19/14	103.23	85.85	0.00	17.38	
CHEVRON CORP 62.0000 Sale 150.0000 Sale	CUSIP Number 06/07/13 12/19/13	r 166764100 12/26/14 12/26/14	7,057.92	7,514.34	0.00	(456.42) (1,327.9 <u>0</u> )	
Security Subtotal			24, 133.55	25,917.87	0.00	(1,784.32)	
CENTENE CORP 1.0000 Sale	CUSIP Number 12/18/13	r <i>15135B101</i> 12/19/14	106.27	56.95	0.00	49.32	
CBRE GROUP INC	CUSIP Number	r 12504L109					
218,0000 Sale 218,0000 Sale 6,0000 Sale	03/08/12 03/09/12 12/18/13	12/19/14 12/19/14 12/19/14	6,263.82 7,628.56 209.97	3,316,33 4,145.58 153,54	0.00	2,947,49 3,482.98 56.4 <u>3</u>	
Security Subtotal			14, 102.35	7,615.45	0.00	6,486.90	
CDK GLOBAL INC SHS 109.0000 Sale	CUSIP Numbar 12/19/13	r 12508E101 12/26/14	4,622.86	3,280.58	0.00	1,342.28	



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2014 ANNUAL STATEMENT SUMMARY

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1099-B	2014 PROCEED	EEDS FROM	BROKER &	BARTER EXCH	<b>13 FROM BROKER &amp; BARTER EXCHANGE TRANSACTIONS</b>	NS	
1a. Description of Property	1b. Date of 1c Acquisition or	1c. Date of Sale or Exchange	1d. Amount	1e. Cost Basis	1f. IRS Code 1g. Adjustments	Gam or (Loss)	Remarks
CALIFORNIA RESOURCES	CUSIP Number 13057Q107	13057Q107				· · · · · · · · · · · · · · · · · · ·	
34.0000 Sale 78.0000 Sale	06/07/13 12/19/13	12/26/14 12/26/14	189 04 433.68	275.74 628.88	0.00	(86.70)	
Security Subtotal			622.72	904.62	00:00	(281.90)	
CONAGRA FOODS INC 209.0000 Sale 572.0000 Sale	CUSIP Number 06/07/13 12/19/13	205887102 12/26/14 12/26/14	7,746.66	7,019.79 19,166.29	0.00	726.87	
Security Subtotal			28,948.07	26,186.08	00'0	2,761.99	
DIGITAL RLTY TR INC 121.0000 Sale	CUSIP Number 06/07/13	253868103 11/10/14	8,320.99	7,282.93	0.00	1,038.06	
<i>DU PONT E I DE NEMOURS</i> 1.0000 Salc	CUSIP Number 06/07/13	263534109 12/26/14	75.09	55.20	0.00	19.89	
EATON CORP PLC 116.0000 Sale 232.0000 Sale	CUSIP Number 06/07/13 12/19/13	G29183103 12/26/14 12/26/14	8,086.18 16,172.39	7,298.66 16,738.78	0.00	787.52 (566.39)	
Security Subtotal			24,258.57	24,037.44	00.00	221.13	
VANGUARD SHORT TERM BOND 378.0000 Sale 13.0000 Sale	CUSIP Number 06/07/13 06/07/13	<i>921937827</i> 11/10/14 12/26/14	30,305.25	30,427.49 1,046.4 <u>5</u>	0.00	(122.24)	
Security Subtotal		i	31,341.85	31,473.94	00.00	(132.09)	
GLOBAL PMTS INC GEORGIA 5.0000 Sale	CUSIP Number 12/18/13	<i>37940X102</i> 12/19/14	405.80	312.61	0.00	93.19	
GATX CORPORATION 3.0000 Sale 5.0000 Salo	CUSIP Number 12/27/12 12/18/13	361448103 12/19/14 12/19/14	170.91 284.85	129.51 253.95	0.00	41.40	
Security Subtotal	•		455.76	383.46	0.00	72.30	

<u>Taxpayer No.</u> 20-3835578	
Account No. 874-04A12	

2014 ANNUAL STATEMENT SUMMARY

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1099-B	2014 PROC	EEDS FROM	BROKER &	BARTER EXCH	2014 PROCEEDS FROM BROKER & BARTER EXCHANGE TRANSACTIONS	NS	
1a. Description of Property	1b. Date of 1c Acquisition or	1c. Date of Sale or Exchange	1d. Amount	1e. Cost Basis	1f. IRS Code 1g. Adjustments	Gam or (Loss)	Remarks
HEXCEL CORP NEW COM 294,0000 Sale 2,0000 Sale 14,0000 Sale	CUSIP Number 07/26/11 12/27/12 12/18/13	<i>428291108</i> 12/19/14 12/19/14 12/19/14	12,018.45 81.75 572.32	7,348.44 53.02 596.68	0.00	4,670.01 28.73 (24.3 <u>6)</u>	
Security Subtotal			12,672.52	7,998.14	0.00	4,674.38	
HALYARD HEALTH INC SHS 9.0000 Sale 22.0000 Sale	CUSIP Number 06/07/13 12/19/13	40650V100 12/26/14 12/26/14	382.28 934.49	289.72 762.93	00:0	92.56 171.56	
Security Subtotal			1,316.77	1,052.65	0.00	264.12	
INTEL CORP 211.0000 Sale	CUSIP Number 06/07/13	<i>458140100</i> 12/26/14	7,946.97	5,200.12	00:00	2,746.85	
INTEGRYS ENERGY GROUP	CUSIP Number	45822P105					
3.0000 Sale	12/18/13	12/19/14	232.11	163.71	0.00	68.40	
INTERCONTINENTAL	CUSIP Number	45866F104					
EXCHANGE INC 74.0000 Sale 3.0000 Sale	12/27/12 12/18/13	12/19/14 12/19/14	16,430.59 666.11	9,304.02 674.04	0.00	7,126.57 (7.93)	
Security Subtotal			17,096.70	9,978.06	0.00	7,118.64	
KEYCORP NEW COM 660.0000 Salc 319.0000 Sale 14.0000 Sale	CUSIP Number 12/06/12 12/07/12 12/18/13	493267108 12/19/14 12/19/14 12/19/14	9,134.26 4,414 90 193.7 <u>6</u>	5,226.34 2,549.13 185.22	0.00	3,907.92 1,865.77 8.54	
Security Subtotal			13,742.92	7,960.69	0.00	5,782.23	
KRAFT FOODS GROUP INC	CUSIP Number	50076Q106					
3.0000 Salo	06/07/13	12/26/14	191.54	160.49	0.00	31.05	
MONOLITHIC PWR SYSTEMS	CUSIP Numbcr	609839105					
7000 Sale 20.0000 Sale	12/27/12 12/18/13	12/19/14 12/19/14	9,002.74 973.28	4,022.32 654.13	00.00	4,980.42	
Security Subtotal			9,976.02	4,676.45	0.00	5,299.57	

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Remarks

## Account No. 874-04A12

THE MULHOLLEM CRAVENS							
		2014 A	NNUAL STA	2014 ANNUAL STATEMENT SUMMARY	MMARY		
1099-B	2014 PROC	SEEDS FROM	1 BROKER &	BARTER EXCH	PROCEEDS FROM BROKER & BARTER EXCHANGE TRANSACTIONS	NS	
1a. Description of Property	1b. Date of 1 Acquisition o	1c. Date of Sale or Exchange	1d. Amount	1e. Cost Basis	1f. IRS Code 1g. Adjustments	Gam or (Loss)	- 1
MOOG INC CL A 157,0000 Salc 4,0000 Sale	CUSIP Number 01/12/12 12/18/13	. 615394202 12/19/14 12/19/14	11,292.41	6,731.35 268.07	00:0	4,561.06 19.64	
Security Subtotal			11,580.12	6,999.42	0.00	4,580.70	
NEXTERA ENERGY INC SHS 27.0000 Sale	CUSIP Number 06/07/13	- <i>65339F101</i> 12/26/14	2,951.57	2,101.20	0.00	850.37	
PACCAR INC 10.0000 Sale	CUSIP Number 06/07/13	- 693718108 12/26/14	695.98	540.80	0.00	155.18	
PPL CORPORATION 43.0000 Sale	CUSIP Number 07/17/13	- 693517106 12/26/14	1,609.77	1,333.75	00:00	276.02	
PROTECTIVE LIFE CORP COM 63.0000 Sale 106.0000 Sale 105.0000 Sale 4.0000 Salo	CUSIP Numbor 01/04/13 01/07/13 01/08/13 12/18/13	- 743674103 12/19/14 12/19/14 12/19/14 12/19/14	4,380.94 7,371.12 7,301.58 278.16	1,891.66 3.181.66 3.166.97 199.60	0000 0000 0000	2,489.28 4,189.46 4,134.61 78.56	
Security Subtotal			19,331.80	8,439.89	00:00	10,891.91	
SBA COMMUNICATIONS CRP A 258.0000 Sale 6.0000 Salo	CUSIP Number 12/27/12 12/18/13	- 78388J106 12/19/14 12/19/14	29,202.26 679.13	18,150.55	0.00	11,051.71	
Security Subtotal			29,881.39	18,665.67	00:0	11,215.72	
SNAP ON INC COM 185.0000 Sale 3.0000 Salo	CUSIP Number 12/27/12 12/18/13	- <i>833034101</i> 12/19/14 12/19/14	25,331.48 410.79	14,381.90 321.84	0.00	10,949.58 88.95	
Security Subtotal			25,742.27	14,703.74	00:00	11,038.53	
VENTAS INC	CUSIP Number	- 92276F100					
AEII 20 0000 Calo	08/07/13	12/26/14	2 162 65	2 120 10	000	42.55	

42.55

0.00

2,120.10

2,162.65

12/26/14

06/07/13

30,0000 Salo

0.0 0.0 0.0 0.0 0.0

107.40 315.91 423.31

129.30 301.72 431.02

*983919101* 12/19/14 12/19/14

CUSIP Number 12/27/12 12/18/13

XILINX INC 3.0000 Sale 7.0000 Sale

Security Subtotal

Merrill Lynch

THE MULHOLLEM CRAVENS

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## Acco 874-

# Taxpayer No. 20-3835578

laxbayer	20-38355
count No.	4-04A12

2014 ANNUAL STATEMENT SUMMARY

1099-B	2014 PROCEED	S	I BROKER &	BARTER EXCH	HANGE	FROM BROKER & BARTER EXCHANGE TRANSACTIONS	S	
1a. Description of Property	1b. Date of 1 Acquisition o	1c. Date of Sale or Exchange	1d. Amount	1e. Cost Basis	1f. IRS Code 1	1g. Adjustments	Gam or (Loss)	Remarks
FEDERATED UL TRASHORT	CUSIP Number	31428Q747						
BOND FUND INSTECT	03/21/13	11/91/00	0 17	0 22	W	0.05	000	
	03/21/13	55	174.23	175.18	3		0.00	
	03/21/13	09/16/14	100.87	101.42	≥	0.55 (w)	000	
1,0000 Sale	03/28/13	09/16/14	32.691.05	32.869.30			(178.25)	
	03/21/13	09/16/14	9.17	9.21			(0.04)	
21,0000 Sale	03/21/13	09/16/14	192.57 9.17	193.83		3.00 0.00 0.00	(1.26)	
	03/28/13	09/16/14	9.16	9.22		0.00	(0:06)	
	03/28/13	09/16/14	2,897.72	2,916.68			(18.96)	
22.0000 Sale	04/09/13	09/16/14	201./3	202.84			(0.07)	
	04/11/13	09/16/14	100.87	101.42		0.00	(0.55)	
	04/30/13	79	9.16	9.24		0.00	(0.08)	
4.0000 Sale	04/30/13	09/16/14	36.67	36.95		900	(0.28)	
	06/07/13	5	9.17	9.21		00:0	(0.04)	
	06/07/13	79	131,488.69	131,918.80	•	0.00	(430.11)	
Security Subtotal			167,994.40	168,627.02		1.55	(631.07)	
LORD ABBETT INFLATION	CUSIP Number	54400U403						
FOCUSED FUND CL F		3	0	6		c c	(1)	
	01/28/13	22:	8.32 13.92	14.96	3		0.00	
6.0000 Sale 1.0000 Sale	01/28/13	09/16/14	83.52 13.92	89.76 14.96	≥≥	1.04 (v)	00.0	
5.0000 Sale 5.0000 Sale	01/28/13	09/16/14	69.60	74.80	8	5.20 (w)	0.00 (546.00)	
			7,497.28	8,057.41	•	13.52	(546.61)	
TEMPLETON GLBL BOND FD	CUSIP Number	880208400						
	01/28/13	09/16/14	26.56	26.68	≯	0.12 (w)	0.00	
	01/28/13 01/28/13 02/09/13 02/20/13 02/20/13	09/16/14 09/16/14 09/16/14 09/16/14 09/16/14	12,549.60 53.11 39.84 13.28 92,96	12,606.30 55.12 39.47 13.36 94.08		8 8 80 80 80 80 80 80 80 80 80 80 80 80 80	(56.70) (2.01) 0.37 (0.08) (1.12)	
1.0000 Sale	03/19/13	09/16/14	13.28	13.44		0.00	(0.16)	



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Merrill Lynch Sank of America Corporation THE MULHOLLEM CRAVENS		Account No. 874-04A12	112 NNUAL STA	Account No. Taxpayer No. 20-3835578 20-3835578 2014 ANNUAL STATEMENT SUMMARY	IMARY	9	Páge 15 of 32
1099-B	2014 PRO	CEEDS FRON	BROKER &	BARTER EXCH	2014 PROCEEDS FROM BROKER & BARTER EXCHANGE TRANSACTIONS	NS	
1a. Description of Property	1b. Date of Acquisition	1b. Date of 1c. Date of Sale Acquisition or Exchange	1d. Amount	1e. Cost Basis	1f. IRS Code 1g. Adjustments	Gam or (Loss)	Remarks
TEMPLETON GLBL BOND FD	CUSIP Number	r 880208400		athrice and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second a second and a second and a second and a second and a second and a second and a second and a second and a second and a second a			
7.0000 Sale 4.0000 Sale	03/19/13	09/16/14 09/16/14	92.96 53.12	94.08	00:00	(1.12) (0.99)	
	07/17/13	09/16/14	13.28	13.23	000	0.05	
	07/17/13	09/16/14	119.52	117.72	0.00	1.80	
	08/19/13	09/16/14	39.84 24.78	38.46 26.64	0.00 0.00 0.00		
	) ; ;		13,171.97	13,231.69	0.12	(59.60)	
Covered Long Term Capital Gains and Losses Subtotal	nd Losses Subi	total	543,028.73	453,639.29	15.19	89,404.63	

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NONCOVERED TRANSACTIONS-1099-B Line 5, Cost basis not reported to IRS (Code E)
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		00'0	2,503.84 939.46 1,488.62	4,931.92	325 30	333,33 865,56	434.63	371.48	371.03	355.38	2,699.09	789.41	1,181.60	7,403.56
		0.00	0.00 0.00 0.00	0.00	5	889	0.00	0.00	0.00	0.00	00:0	0.00	0.00	0.00
Sode E)		75,000.00	1,294.19 453.15 790.20	2,537.54	245 22	345.32 836.20	416.25	479.40	479.85	495,50	2,065.84	572.00	860.52	6,550.88
eported to IRS (C		75,000.00	3,798.03 1,392.61 2,278.82	7,469,46	000	1.701.76	820.88	820.88	820.88	820.88	4,764.93	1,361.41	2,042.12	13,954.44
st basis not r	er 172967CK5	05/05/14	er 009717101 12/19/14 12/19/14 12/19/14		J,		12/19/14							
099-B Line 5, Co	CUSIP Number	01/05/06	CUSIP Number 05/11/09 05/14/09 05/19/09	,	CUSIP Numb	10/16/0/	12/14/07	01/15/08	03/11/08	03/24/08	05/11/09	05/14/09	05/19/09	+
NONCOVERED TRANSACTIONS-1099-B Line 5, Cost basis not reported to IRS (Code E)	CITIGROUP INC	05.125% MAY 05.2014 75000.0000 Redemption	AKAMAI TECHNOLOGIES INC 60.0000 Sale 22.0000 Salo 36.0000 Salo	Security Subtotal	BARD C R INC	4,0000 Salo 10,000 Sale	5.0000 Sale	5.0000 Sale	5.0000 Sale	5.0000 Sale	28.0000 Sale	8.0000 Sale	12,0000 Salo	Security Subtotal

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2014 ANNUAL STATEMENT SUMMARY

ACCOUNT NO.	874-04A12

1099-B	2014 PROCEEDS FRO	EEDS FROM	I BROKER &	BARTER EXCH	M BROKER & BARTER EXCHANGE TRANSACTIONS	NS	
1a. Description of Property	1b. Date of 1c Acquisition or	1c. Date of Sale or Exchange	1d. Amount	1e. Cost Basis	1f. IRS Code 1g. Adjustments	Gam or (Loss)	Remarks
COVANCE INC 2.0000 Sale 50.0000 Sale 44.0000 Sale 4.0000 Sale 24.0000 Sale Security Subtotal	CUSIP Number 03/24/08 12/31/08 05/11/09 05/14/09	222816100 12/19/14 12/19/14 12/19/14 12/19/14	206.44 5,161.24 4,541.89 412.90 2,477.40	167.02 2,301.15 1,752.06 157.22 954.24 5,331.69	00:00 00:00 00:00 00:00 00:00	39.42 2,860.09 2,789.83 255.68 1,523.16 7,468.18	
CENTENE CORP 148.0000 Sale 31.0000 Salc 77.0000 Sale Security Subtotal	CUSIP Number 01/13/10 01/14/10 01/15/10	15135B101 12/19/14 12/19/14 12/19/14	15,727.25 3,294.22 8,182.43 27,203.90	3,203.51 681.46 1,693.76 5,578.73	0.00	12,523.74 2,612.76 6,488.67 21,625.17	
GLOBAL PMTS INC GEORGIA 39,0000 Salc 52,0000 Sale 14,0000 Sale 6,0000 Sale	CUSIP Number 01/29/09 05/11/09 05/14/09 06/25/09	37940X102 12/19/14 12/19/14 12/19/14 12/19/14	3,165,16 4,220.23 1,136.21 486.95 9,008.55	1,353.08 1,738.69 436.79 226.38 3,754.94	0.00 0.00 0.00 0.00 0.00	1,812.08 2,481.54 699.42 260.57 5,253.61	
GATX CORPORATION 60,0000 Sale 4,0000 Sale 28,0000 Sale 37,0000 Sale 56,0000 Sale 77,0000 Sale	CUSIP Number 05/11/09 05/14/09 05/19/09 04/16/10 06/30/10	361448103 12/19/14 12/19/14 12/19/14 12/19/14 12/19/14	3,418.13 227.87 1,595.13 2,107.85 3,190.26 4,386.61	1,684.04 103.31 731.36 1,232.75 1,504.88 2,056.05 7,312.39	00000000000000000000000000000000000000	1,734.09 124.56 863.77 875.10 1,685.38 2,330.56 7,613.46	
INTEGRYS ENERGY GROUP INC 63.0000 Sale 54.0000 Sale 10.0000 Sale 22.0000 Sale	CUSIP Number 12/31/08 05/11/09 05/14/09 05/19/09	45822P105 12/19/14 12/19/14 12/19/14	4,874.21 4,177.89 773.68 1,702.11	2,653.56 1,581.57 282.77 622.38 5,140.28	0.00 0.00 0.00 0.00 0.00	2,220.65 2,596.32 490.91 1,079.73 6,387.61	



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		2014 A	NNUAL STA	2014 ANNUAL STATEMENT SUMMARY	MMARY		
1099-B	2014 PROC	EEDS FROM	1 BROKER &	BARTER EXC	ROCEEDS FROM BROKER & BARTER EXCHANGE TRANSACTIONS	NS	
1a. Description of Property	1b. Date of 1 Acquisition o	1c. Date of Sale or Exchange	1d. Amount	1e. Cost Basis	1f. IRS Code 1g. Adjustments	Gam or (Loss)	Re
XILINX INC	CUSIP Number	983919101		II.		1	
13.0000 Sale	10/16/07	12/19/14 12/19/14	560.31 1 293 04	329.49	0.00	230.82 622.84	
	01/15/08	12/19/14	862.03	381.40	00:00	480.63	
25,0000 Sale	10/14/08	12/19/14	1,077.53	534.47	0.00	543.06	
25,0000 Sale	10/27/08	12/19/14	1,077.53	446.86	0.00	630.67	
82.0000 Sale	05/11/09	12/19/14	3,534.33	1,567.01	0.00	1,967.32	
12.0000 Sale	05/14/09	12/19/14	517.22	229.56	0.00	287.66	
50.0000 Sale	05/19/09	12/19/14	2,155.08	987.50	00:00	1,167.58	
Security Subtotal			11,077.07	5,146.49	0.00	5,930.58	
JP MORGAN STRATEGIC	CUSIP Number	4812A4351					
1221,0000 Sale ,4370 Sale	01/04/11 01/04/11	09/16/14 09/16/14	14,493.27 5.19	14,481.71	0.00	11,56	
Security Subtotal			14,498.46	14,486.89	0.00	11.57	

S (Code X)	:
t reported to IRS	13057Q107
5, Cost basis no	CUSIP Number 13057Q107
NS-1099-B Line	
OTHER TRANSACTIONS-1099-B Line 5, Cost basis not reported to IRS (Code X)	CALIFORNIA RESOURCES CORP SHS

A/N

66,625.66

0.00

130,839.83

197,465.49

Noncovered Long Term Capital Gains and Losses Subtotal

**NET LONG TERM CAPITAL GAINS AND LOSSES** 

156,030.29

15.19

584,479.12

740,494.22

N/A

N/A

0.00	0.00		0.00	0.00
N/A	N/A		N/A	
4.47	4.75		3.31	12.53
12/10/14	<i>40650V100</i> 11/12/14	31428Q747	09/16/14	
12/10/14	CUSIP Number 11/12/14	CUSIP Number	03/06/14	
COMP SAS Cash/Lieu	HALYARD HEALTH INC SHS Cash/Lieu	FEDERATED ULTRASHORT BOND FUND INSTL CL .3620 Sale		Other Transactions Subtotal
	ieu 12/10/14 12/10/14 4.47 N/A	12/10/14 12/10/14 4.47 N/A CUSIP Number 40650V100 4.75 N/A	12/10/14 12/10/14 4.47 N/A  CUSIP Number 40650V100 4.75 N/A  CUSIP Number 31428Q747	12/10/14 12/10/14 4.47 N/A  CUSIP Number 40650V100 4.75 N/A  CUSIP Number 31428Q747 3.31 N/A

Other Transactions Subtotal

Account No. 874-04A12

Taxpayer No.

20-3835578

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# THE MULHOLLEM CRAVENS

# 2014 ANNUAL STATEMENT SUMMARY

2014 PROCEEDS FROM BROKER & BARTER EXCHANGE TRANSACTIONS

Gam or (Loss) 1f. IRS Code 1g. Adjustments 1e. Cost Basis 1d. Amount 1c. Date of Sale or Exchange 1b. Date of Acquisition

742,505.06

SALES PROCEEDS AND NET GAINS AND LOSSES

1a. Description of Property

1099-B

Remarks

156,520.72

(W) This transaction has been identified as a "Wash Sale" based on IRS regulations. The Adjustments column reflects the deferred loss amount. The cost basis of the related transaction(s) has been adjusted by the deferred loss amount from either the cost basis on purchases or proceeds from short sales. Please refer to the instructions for Form 8949 for how to report the deferred loss amount and applicable adjustment code. 490.43 89,404.63 66,625.66 N/C COVERED SHORT TERM GAINS/LOSSES COVERED LONG TERM GAINS/LOSSES NONCOVERED LONG TERM GAINS/LOSSES OTHER TRANSACTIONS

The gain or loss of this transaction includes an adjustment to basis for the deferred loss amount on one or more previous "Wash Sales." ε

N/A Cost basis information is not available. As a result, gain/loss will not be calculated (N/C).