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, Form 990-PF

Return of Private Foundation

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf.

| FOT C | alen | dar year 2014 or tax year beginning | | , and ending | | |
|---|--------------|--|--|---------------------------|--|---|
| Nan | ne of | foundation | | | A Employer identification | number |
| T | NC | SMEIRE CHARITABLE FOUNT | DATION TRUST | | i | |
| 2 | 00 | 8 | | | 26-3042940 | <u> </u> |
| Num | ber a | nd street (or P O box number if mail is not delivered to stree | et address) | Room/suite | B Telephone number | |
| 6 | S | OUTH SUMMIT STREET | | | (251)928-1 | .655 |
| City | | own, state or province, country, and ZIP or foreign | postal code | | C If exemption application is p | |
| | | RHOPE, AL 36532 | F | | The examplion application to p | onding, oncon role |
| | | all that apply: Initial return | Initial return of a fo | rmer nublic charity | D 1. Foreign organizations | s check here |
| u | 11001 | Final return | Amended return | Titler public offurity | D 1. 1 Ordigit organizations | 3, GILOUK HOLO |
| | | Address change | Name change | | Foreign organizations me check here and attach co | seting the 85% test, |
| <u></u> | hoole | | exempt private foundation | | | |
| <u>, , , , , , , , , , , , , , , , , , , </u> | _ | | i | tion | E If private foundation sta | |
| <u> </u> | | ction 4947(a)(1) nonexempt charitable trust | Other taxable private founda | | under section 507(b)(1) | |
| | | · — | ting method: X Cash | Accrual | F If the foundation is in a | |
| | | Part II, col. (c), line 16) | Other (specify) | | under section 507(b)(1) |)(B), check here |
| | _ | | umn (d) must be on cash b | asis) | | (4) |
| Pa | rt I | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
| | 1 | Contributions, gifts, grants, etc., received | 83,350. | | N/A | |
| | 2 | Check Inf the foundation is not required to attach Sch B | | | | |
| | 3 | Interest on savings and temporary cash investments | | | - | |
| | 4 | Dividends and interest from securities | - | | | |
| | - | Gross rents | | | | |
| | | Net rental income or (loss) | | | DECI | EIVED |
| | | | | | - NEVI | 0 |
| e | | Net gain or (loss) from sale of assets not on line 10 Gross sales price for all | | | 4 | 186 |
| Revenue | b | assets on line 6a | | 0. | MAY 2 | 0 2015 |
| æ | 7 | Capital gain net income (from Part IV, line 2) | | | 1 13 | |
| | 8 | Net short-term capital gain | | | | |
| | 49 | Income modifications Gross sales less returns | | | POGD | tn. Ul |
| | | and allowances | | | | |
| | | Less Cost of goods sold | | | | |
| | | Gross profit or (loss) | | | | |
| | 11 | Other income | 02.250 | | | |
| | 12 | Total. Add lines 1 through 11 | 83,350. | 0. | | |
| | 13 | Compensation of officers, directors, trustees, etc | 0. | 0. | | 0. |
| | 14 | Other employee salaries and wages | | | | |
| S | | Pension plans, employee benefits | | | | |
| Expenses | | Legal fees | | | | |
| per | | Accounting fees | | | _ | |
| | | Other professional fees | | | | |
| strative | | Interest | | | | |
| Tat | 18 | Taxes | | | | |
| is | f 9 | Depreciation and depletion | | | | |
| Admini | 20 | Occupancy | | | | |
| 8 | 21 | Travel, conferences, and meetings | | | | |
| and | 22 | Printing and publications | | | | |
| Ē | 23 | Other expenses STMT 1 | 28,326. | 0. | | 0. |
| ig i | 2 4 | Total operating and administrative | | | | |
| e. | Ć | expenses. Add lines 13 through 23 | 28,326. | 0. | | 0. |
| ୍ର | 25 | Contributions, gifts, grants paid | 55,907. | | | 55,907. |
| g | 2 6 | Total expenses and disbursements | | | | |
| d | Ž | Add lines 24 and 25 | 84,233. | 0. | | 55,907. |
| | 27 | Subtract line 26 from line 12: | | | | |
| 9 | <i>f</i> / . | Excess of revenue over expenses and disbursements | 883. | | | |
| | | Net investment income (if negative, enter -0-) | | 0. | - | |
| | | Adjusted net income (if negative, enter -0-) | | | N/A | - |
| 4005 | | Autuated liet income (ii degative, enter -0-) | | _ - | <u> </u> | |

| Part IV | (a) List and descri | be the ki | nd(s) of property sold (e.g. or common stock, 200 shs | , real estate, | income | ` P - P | v acquired urchase onation | (c) Date acc (mo., day, | uired yr.) | (d) Date sold (mo., day, yr.) |
|---------------------|--|-----------------------|---|------------------------------------|--------------------------------------|--------------|----------------------------------|--|------------------------|---|
| <u>1a .</u> | · · · · · · · · · · · · · · · · · · · | | | | | | | | | |
| <u>b</u> | NON | Œ | | | | | | | | |
| <u>c</u> | | | | | | <u> </u> | | | | |
| <u>d</u> | | - | . <u></u> | <u> </u> | | | | | | |
| <u>e</u> (e) Gr | ross sales price | (f) [| Depreciation allowed (or allowable) | | st or other basis expense of sale | 1 | | (h) Gaın (e) plus (f | or (loss)) minus (| |
| a | | | | | | | _ | | | |
| _b | | | | | | _ | · | | | |
| | | | | | | | | | | |
| _ <u>d</u> | | | | | | | | | | |
| Complete | only for accete chayens | | column (h) and owned by t | the foundation | on 12/21/60 | | | | | |
| | V. as of 12/31/69 | | (j) Adjusted basis as of 12/31/69 | (k) Ex | cess of col. (i) | | | (I) Gains (Col. ol. (k), but not Losses (fro | less than | 1 -0-) or |
| a | | | | | | | | | | |
| b | | | | | | | | | | |
| c | | | | | <u> </u> | | | | | |
| d | | | | | - | | | | | |
| е | | | | | _ | | | | | |
| 2 Capital gai | in net income or (net cap | utal loss) | If gain, also enter | ın Part I, line ın Part I, line | 7 7 | } _; | 2 | | | |
| If gam, als | o enter in Part I, line 8, c | | ned in sections 1222(5) and). | d (6): | | } | | | | |
| If (loss), e | Ouglification I Ir | odor 6 | ection 4940(e) for | Doducod | Tay on Not | 1000 | tmont In | | | |
| Was the found | undation does not qualif | on 4942 ly under : | tax on the distributable am section 4940(e). Do not co nn for each year; see the ir | mplete this pa | ırt. | | | | | Yes X No |
| | (a) Base period years ear (or tax year beginning | | (b) Adjusted qualifying dist | | Net value of no | (c) | ble-use asse | ts (co | | (d) ution ratio ided by col. (c)) |
| | 2013 | ***/ | 4 | 3,619. | | | 3,06 | | (-) | 14.217405 |
| | 2012 | | | 5,095. | | | 1,50 | | | 23.334441 |
| | 2011 | | | 8,789. | | | 2,14 | | | 18.117235 |
| | 2010 | | 2 | 2,263. | | | 2,98 | | | 7.470805 |
| | 2009 | | | 0. | | | 40 | 6. | | .000000 |
| | ne 1, column (d) | | | l 0 b 5 | | - - t | | 2 | | 63.139886 |
| | ation has been in existen | | se period - divide the total o than 5 years | on line 2 by 5, | or by the number | r of years | | 3 | | 12.627977 |
| 4 Enter the r | net value of noncharitable | e-use ass | sets for 2014 from Part X, I | ine 5 | | | | 4 | | 2,241. |
| 5 Multiply lin | ne 4 by line 3 | | | | | | | 5 | | 28,299. |
| 6 Enter 1% | of net investment income | e (1% of | Part I, line 27b) | | | | | 6 | | 0. |
| 7 Add lines ! | F and G | | | | | | | 7 | | 28,299. |
| 7 7 7 10 0 111100 1 | o and o | | | | | | | | | 20,233. |

| _ | TONSMEIRE CHARITABLE FOUNDATION TRUST | | | _ |
|----|---|-------------|--|--------------------|
| | | 26-3042 | | Page 4 |
| | | | mstruc | uonsj |
| | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. | | | |
| | Date of ruling or determination letter: | | | ^ |
| | Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1% | 1 | | 0. |
| | of Part I, line 27b | | | |
| | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). | | | • |
| | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 2 | | <u> </u> |
| - | Add lines 1 and 2 | 3 | | 0. |
| | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 4 | | 0. |
| | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | 5 | | 0. |
| | Credits/Payments: | | | |
| | 2014 estimated tax payments and 2013 overpayment credited to 2014 | | | |
| | Exempt foreign organizations - tax withheld at source | | | |
| | Tax paid with application for extension of time to file (Form 8868) | | | |
| | Backup withholding erroneously withheld 6d 6d | _ | | • |
| | Total credits and payments. Add lines 6a through 6d | 7 | | 0. |
| | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached | 8 | | |
| | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | 9 | | 0. |
| | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | | |
| | Enter the amount of line 10 to be: Credited to 2015 estimated tax | 11 | | |
| | t VII-A Statements Regarding Activities | | | Yes No |
| | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene i | Π | | |
| | any political campaign? | • | 1a | X |
| | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition) | | 16 | X |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published | or or | | |
| | distributed by the foundation in connection with the activities | | | . |
| | Did the foundation file Form 1120-POL for this year? | | 1c | <u> </u> |
| | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | | |
| | (1) On the foundation. \blacktriangleright \$ 0. (2) On foundation managers. \blacktriangleright \$ 0. | | | |
| | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | | | İ |
| | managers. ► \$ | | | . . |
| | 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 | | | |
| | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or | | | v |
| | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | 3 | X |
| | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | N/A | 4a | - ^ - |
| | If "Yes," has it filed a tax return on Form 990-T for this year? | IV/A | 4b | x |
| | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | 5 | ^ <u>~</u> |
| | If "Yes," attach the statement required by General Instruction T. | | | |
| | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | 1 1 | |
| | By language in the governing instrument, or Described in a selection of the conflict with the attack of the conflict with the conf | la | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state Property Prop | iaw | | v |
| | remain in the governing instrument? | | 7 | X X |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV | | | - ^ |
| ٥. | Colombia at the desired by the form delicer was advantaged as a property of (assessment) | | | |
| Вa | Enter the states to which the foundation reports or with which it is registered (see instructions) | | | |
| | AL If the province "Yes" to line 7, has the foundation furnished a copy of Form 200 DE to the Atternay Copyrel (or designate) | | | |
| | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) | NT / 7 | 0. | |
| | of each state as required by General Instruction G? If "No," attach explanation | N/A | 8b | |
| | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for caler | iudi | | • |
| | year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV | | 9 | X |

| 10 | X Form **990-PF** (2014)

| | TONSMEIRE CHARITABLE FOUNDATION TRUST | | | |
|----|--|--------------|--|----------------|
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| _ | art VII-A Statements Regarding Activities (continued) | | | |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of | | | |
| | section 512(b)(13)? If "Yes," attach schedule (see instructions) | 11_ | | <u>X</u> |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? | | | |
| | If "Yes," attach statement (see instructions) | 12_ | | <u>X</u> |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | X | |
| | Website address ► N/A | | 4 | |
| 14 | The books are in care of ► TONSMEIRE Telephone no. ► (251) 9 | | | 5 |
| | Located at ► 6 SOUTH SUMMIT STREET, FAIRHOPE, AL ZIP+4 ►30 | 532 | | |
| 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 | N | /A_ | N |
| 16 | At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, | 1 . | Yes | No |
| | 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 90-22.1). If "Yes," enter the name of the | | | |
| _ | foreign country | <u> </u> | | |
| Pi | art VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | 127 | N . |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| 1: | During the year did the foundation (either directly or indirectly): | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | |
| | a disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | | | |
| | (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)? Yes X No | | | |
| | , , | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" | | | |
| | if the foundation agreed to make a grant to or to employ the official for a period after | | | |
| | termination of government service, if terminating within 90 days.) | | | |
| | o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | 1 | | |
| | section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | 1b | | <u></u> |
| | Organizations relying on a current notice regarding disaster assistance check here | | | |
| , | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected | ١, | | ., |
| _ | before the first day of the tax year beginning in 2014? | 1c | | X |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation | | | |
| | defined in section 4942(j)(3) or 4942(j)(5)): | | | |
| | a 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? Yes X No | | | |
| | | | | |
| | If "Yes," list the years \(\bigcup | | | |
| | | | | |
| | 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.) N/A | 2b | | |
| | statement - see instructions.) If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | 20 | | |
| | | | | |
| 9 | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | | |
| 3 | during the year? Wes X No | | | |
| 1 | b If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after | 1 | | |
| | May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose | | | |
| | of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, | | | |
| | Form 4720, to determine if the foundation had excess business holdings in 2014) N/A | 3ь | | |
| A | a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | х |
| | b Did the foundation invest during the year any amount in a mariner that would jeopardize its charitable purposes. b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that | Ta | | <u> </u> |
| | had not been removed from jeonardy before the first day of the tax year beginning in 2014? | Ah | | x |

TONSMEIRE CHARITABLE FOUNDATION TRUST 26-3042940 2008 Page 6 Form 990-PF (2014) Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations 5b section 53.4945 or in a current notice regarding disaster assistance (see instructions)? N/A Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to guestion 5a(4), does the foundation claim exemption from the tax because it maintained ___ Yes [___ No N/A expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? **b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? X 6b If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? 7b Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average hours per week devoted to position (c) Compensation (e) Expense account, other allowances (If not paid, (a) Name and address ARTHUR C. TONSMEIRE, TRUSTEE/ FDN. MGR. 6 SOUTH SUMMIT STREET 0.00 0 0. FAIRHOPE, AL 36532

| 2 Compensation of five highest-paid employees (other than those i | | , enter "NONE." | (-1) | |
|---|---|------------------|--|---|
| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
| NONE | | | | |
| | | | | |
| | | | | _ |
| | | | | |
| | | - | | |
| Total number of other employees paid over \$50,000 | | <u> </u> | • | 0 |

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| TONSMEIRE CHARITABLE FOUNDATI | | 3042940 Page 7 |
|---|---|------------------|
| Part VIII Information About Officers, Directors, Trustees, For Paid Employees, and Contractors (continued) | | |
| 3 Five highest-paid independent contractors for professional services. If none | e enter "NONE." | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services | | <u>▶</u> 0 |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. Include releval number of organizations and other beneficiaries served, conferences convened, research papers. | it statistical information such as the ers produced, etc. | Expenses |
| 1 N/A | | |
| | | |
| | | |
| 2 | | |
| | | |
| 3 | | |
| · | | |
| | | |
| 4 | | |
| | | |
| Part IX-B Summary of Program-Related Investments | | |
| Describe the two largest program-related investments made by the foundation during the tax | vear on lines 1 and 2. | Amount |
| 1 N/A | | |
| | | |
| | | |
| 2 | | |
| | | |
| All other program-related investments. See instructions. | | |
| 3 | | |
| | | ļ |

Total. Add lines 1 through 3

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|----|--|-------------|----------------------|
| Pa | Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations | ndations | , see instructions.) |
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| а | Average monthly fair market value of securities | 1a | 0. |
| | Average of monthly cash balances | 1b | 2,275. |
| C | Fair market value of all other assets | 1c | |
| d | Total (add lines 1a, b, and c) | 1d | 2,275. |
| | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) 1e 0. | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 2,275. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 34. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 2,241. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 112. |
| P | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are | ıd çertain | <u> </u> |
| | foreign organizations check here 🕨 🔲 and do not complete this part.) | | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 112. |
| 2a | Tax on investment income for 2014 from Part VI, line 5 | | |
| b | Income tax for 2014. (This does not include the tax from Part VI.) | | |
| C | Add lines 2a and 2b | 2c | 0. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 112. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 112. |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0. |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 112. |
| P | Qualifying Distributions (see instructions) | - | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| a | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 55,907. |
| b | Program-related investments - total from Part IX-B | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| а | Suitability test (prior IRS approval required) | 3a | |
| b | Cash distribution test (attach the required schedule) | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | <u>55,907.</u> |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | | |
| | income. Enter 1% of Part I, line 27b | 5 | 0, |
| 6 | Adjusted qualifying distributions Subtract line 5 from line 4 | 6 | 55,907. |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation | qualifies f | or the section |
| | 4040(a) radication of tax in those years | | |

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2013 | (c) 2013 | (d) 2014 |
|--|---------------|---------------------------------------|---------------------------------------|---------------------------|
| 1 Distributable amount for 2014 from Part XI, | | <u>.</u> | | |
| line 7 | | | | 112. |
| 2 Undistributed income, if any, as of the end of 2014 | | · · · · · · · · · · · · · · · · · · · | | |
| a Enter amount for 2013 only | | | 0. | |
| b Total for prior years: | | | | |
| ,, | | 0. | | |
| 3 Excess distributions carryover, if any, to 2014: | | | | |
| a From 2009 | | | | |
| b From 2010 22, 105. | | | | |
| c From 2011 38,682. | | | | |
| dFrom 2012 35,020. | | | | |
| e From 2013 43,466. | | | | |
| f Total of lines 3a through e | 139,273. | | | |
| 4 Qualifying distributions for 2014 from | | | | |
| Part XII, line 4: \triangleright \$ 55,907. | | | | |
| a Applied to 2013, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior | | | | |
| years (Election required - see instructions) | | 0. | · · · · · · · · · · · · · · · · · · · | |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | 0. | | | |
| d Applied to 2014 distributable amount | | | | 112. |
| e Remaining amount distributed out of corpus | 55,795. | | | |
| 5 Excess distributions carryover applied to 2014 | 0. | | | 0. |
| (If an amount appears in column (d), the same amount must be shown in column (a)) | | | | |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 195,068. | | | |
| b Prior years' undistributed income. Subtract | | | | |
| line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' | | | | |
| undistributed income for which a notice of deficiency has been issued, or on which | | | | |
| the section 4942(a) tax has been previously | | | | |
| assessed | | 0. | | |
| d Subtract line 6c from line 6b. Taxable | | | | |
| amount - see instructions | | 0. | 1 | |
| e Undistributed income for 2013. Subtract line | | | | |
| 4a from line 2a. Taxable amount - see instr. | <u> </u> | | 0. | |
| f Undistributed income for 2014. Subtract | İ | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2015 | | | | 0. |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by | İ | | | |
| section 170(b)(1)(F) or 4942(g)(3) (Election | _ | | | |
| may be required - see instructions) | 0. | | · | |
| 8 Excess distributions carryover from 2009 | _ | | | |
| not applied on line 5 or line 7 | 0. | | | |
| 9 Excess distributions carryover to 2015. | 105.050 | | | |
| Subtract lines 7 and 8 from line 6a | 195,068. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2010 22, 105. | | | | |
| b Excess from 2011 38,682. | | | | |
| c Excess from 2012 35,020. | | | | |
| d Excess from 2013 e Excess from 2014 43,466. 55,795. | | | | |
| e Excess from 2014 55, 795. | | | | Form 990-PF (2014) |

| Part XIV Private Operating Fo | oundations (see in | structions and Part VII | A, question 9) | N/A | 42740 Tago 10 |
|---|---------------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------|
| 1 a If the foundation has received a ruling of | r determination letter that | t it is a private operating | | | |
| foundation, and the ruling is effective for | r 2014, enter the date of | the ruling | • | | |
| b Check box to indicate whether the found | lation is a private operati | ng foundation described i | n section | 4942(j)(3) or 49 | 42(_J)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | |
| income from Part I or the minimum | (a) 2014 | (b) 2013 | (c) 2012 | (d) 2011 | (e) Total |
| investment return from Part X for | | | | | |
| each year listed | | | n | | |
| b 85% of line 2a | | | _ | | |
| c Qualifying distributions from Part XII, | | - | | | |
| line 4 for each year listed | | | | | |
| d Amounts included in line 2c not | | | | | |
| used directly for active conduct of | | | | , | |
| exempt activities | | 1 | | | |
| e Qualifying distributions made directly | | | | | |
| for active conduct of exempt activities. | | | | | |
| Subtract line 2d from line 2c | | | | | |
| 3 Complete 3a, b, or c for the | | | | | |
| alternative test relied upon: | | | | | |
| a "Assets" alternative test - enter: (1) Value of all assets | | | | | |
| ` , | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b "Endowment" alternative test - enter | | | | | |
| 2/3 of minimum investment return | | | | | |
| shown in Part X, line 6 for each year listed | | | | | |
| 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 support from | | | | | |
| an exempt organization | | | | | |
| (4) Gross investment income | · · · · · · · · · · · · · · · · · · · | | . = | | |
| Part XV Supplementary Info | rmation (Comple | te this part only | f the foundation | had \$5,000 or mo | ore in assets |
| at any time during t | | | N/A | • | |
| 1 Information Regarding Foundatio | n Managers: | | | | |
| a List any managers of the foundation wh | • | than 2% of the total conti | butions received by the | foundation before the clos | se of any tax |
| year (but only if they have contributed n | | | • | | • |
| | | | | | |
| b List any managers of the foundation wh | o own 10% or more of th | ne stock of a corporation (| or an equally large portion | on of the ownership of a pa | artnership or |
| other entity) of which the foundation has | | | . , , , | , , | · |
| | | | | | |
| 2 Information Regarding Contributi | ion, Grant, Gift, Loan | , Scholarship, etc., Pr | ograms: | | |
| Check here 🕨 🗓 if the foundation o | | | | ot accept unsolicited requ | ests for funds. If |
| the foundation makes gifts, grants, etc. | (see instructions) to indiv | viduals or organizations u | nder other conditions, co | omplete items 2a, b, c, and | d. |
| a The name, address, and telephone num | ber or e-mail address of f | the person to whom appli | cations should be addres | ssed: | |
| | | | | | |
| | | | | | |
| b The form in which applications should b | e submitted and informa | tion and materials they sh | ould include: | | |
| | | · | | | |
| c Any submission deadlines: | | <u> </u> | | | |
| | | | | | |
| d Any restrictions or limitations on awards | s, such as by geographic | al areas, charitable fields, | kınds of institutions, or i | other factors: | |
| - | - · | | | | |
| | | | | | |

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Form 990-PF (2014)

26-3042940 Page 11

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to Foundation Amount any foundation manager contribution status of Name and address (home or business) or substantial contributor recipient a Paid during the year NONE UNRESTRICTED APALACHICOLA RIVER KEEPER CONTRIBUTION 3,300. APILACHICOLA, FL NONE UNRESTRICTED FAIRHOPE POINT CLEAR ROTARY YOUTH CLUB CONTRIBUTION FAIRHOPE, AL 31,088, NONE UNRESTRICTED HOLY SPIRIT CATHOLIC CHURCH CONTRIBUTION 600. MOBILE AL NONE UNRESTRICTED IMPACT CONTRIBUTION 1,126. MOBILE, AL NONE UNRESTRICTED MISC. CONTRIBUTIONS (ALL CONTRIBUTION CONTRIBUTIONS \$1,000 OR UNDER) 6.375. MOBILE AL SEE CONTINUATION SHEET(S) ► <u>3a</u> 55.907. Total **b** Approved for future payment NONE Total

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| | 26- | 30 | 42940 | Page 12 |
|--------------------|-----|----|-------|---------|
| 26-3042940 Page 12 | | | | |
| | 26- | 30 | 42940 | Page 12 |

| Part XVI-A | Analysis of Income-Producing Activities |
|------------|--|
|------------|--|

| • | | business income | | ded by section 512, 513, or 514 | (e) |
|--|--|--|-------------------------------|---------------------------------|-----------------------------------|
| Program service revenue: | Business code | (b) Amount | (C) Exclu- sion code | (d) Amount | Related or exempt function income |
| 1 | 0000 | | | | |
| | | | | | |
| | | | | | |
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| | | | | | |
| | - | | | | |
| Fees and contracts from government agencies | | | - | | |
| Membership dues and assessments | | | - | | - |
| nterest on savings and temporary cash nvestments | | | | | |
| ividends and interest from securities | | | _ | | |
| let rental income or (loss) from real estate: | | | - | | |
| Debt-financed property | | | | | |
| Not debt-financed property | | | | | |
| let rental income or (loss) from personal | | | | | |
| roperty | | | | | |
| Other investment income | | | | | |
| Gain or (loss) from sales of assets other | | | | | |
| han inventory | - | | | | _ |
| let income or (loss) from special events | + | | | | |
| ross profit or (loss) from sales of inventory | | | | | |
| ther revenue; | | | | | |
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| | t I | | | | |
| | | | | | |
| | | | | 0 | |
| | | 0. | <u> </u> | <u> </u> | • |
| Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) | | 0. | | | |
| oubtotal. Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations.) | | | | 13 _ | |
| oubtotal. Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations.) | to the Acco | | | 13 _ | |
| oubtotal. Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations.) Int XVI-B Relationship of Activities | | mplishment of E | kemp | 13 _ t Purposes | |
| Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Worksheet in line 13 instructions to verify calculations.) Relationship of Activities e No. Explain below how each activity for which inc | ome is reported in | mplishment of Excolumn (e) of Part XVI-A | kemp | 13 _ t Purposes | |
| int XVI-B Relationship of Activities e No. Explain below how each activity for which inc | ome is reported in | mplishment of Excolumn (e) of Part XVI-A | kemp | 13 _ t Purposes | |
| tubtotal. Add columns (b), (d), and (e) total Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations.) THE XVI-B Relationship of Activities e No. Explain below how each activity for which inc | ome is reported in | mplishment of Excolumn (e) of Part XVI-A | kemp | 13 _ t Purposes | |
| tubtotal. Add columns (b), (d), and (e) total Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations.) THE XVI-B Relationship of Activities e No. Explain below how each activity for which inc | ome is reported in | mplishment of Excolumn (e) of Part XVI-A | kemp | 13 _ t Purposes | |
| tubtotal. Add columns (b), (d), and (e) total Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations.) THE XVI-B Relationship of Activities e No. Explain below how each activity for which inc | ome is reported in | mplishment of Excolumn (e) of Part XVI-A | kemp | 13 _ t Purposes | |
| ubtotal. Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations.) ort XVI-B Relationship of Activities e No. Explain below how each activity for which inc | ome is reported in | mplishment of Excolumn (e) of Part XVI-A | kemp | 13 _ t Purposes | |
| ubtotal. Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations.) ort XVI-B Relationship of Activities e No. Explain below how each activity for which inc | ome is reported in | mplishment of Excolumn (e) of Part XVI-A | kemp | 13 _ t Purposes | |
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| ubtotal. Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations.) rt XVI-B Relationship of Activities e No. Explain below how each activity for which inc | ome is reported in | mplishment of Excolumn (e) of Part XVI-A | kemp | 13 _ t Purposes | |
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| ubtotal. Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations.) rt XVI-B Relationship of Activities e No. Explain below how each activity for which inc | ome is reported in | mplishment of Excolumn (e) of Part XVI-A | kemp | 13 _ t Purposes | |
| ubtotal. Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations.) rt XVI-B Relationship of Activities e No. Explain below how each activity for which inc | ome is reported in | mplishment of Excolumn (e) of Part XVI-A | kemp | 13 _ t Purposes | |
| tubtotal. Add columns (b), (d), and (e) total Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations.) THE XVI-B Relationship of Activities e No. Explain below how each activity for which inc | ome is reported in | mplishment of Excolumn (e) of Part XVI-A | kemp | 13 _ t Purposes | |
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| tubtotal. Add columns (b), (d), and (e) total Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations.) THE XVI-B Relationship of Activities e No. Explain below how each activity for which inc | ome is reported in | mplishment of Excolumn (e) of Part XVI-A | kemp | 13 _ t Purposes | |
| tubtotal. Add columns (b), (d), and (e) total Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations.) THE XVI-B Relationship of Activities e No. Explain below how each activity for which inc | ome is reported in | mplishment of Excolumn (e) of Part XVI-A | kemp | 13 _ t Purposes | |
| tubtotal. Add columns (b), (d), and (e) total Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations.) THE XVI-B Relationship of Activities e No. Explain below how each activity for which inc | ome is reported in | mplishment of Excolumn (e) of Part XVI-A | kemp | 13 _ t Purposes | |
| e No. Explain below how each activity for which inc | ome is reported in | mplishment of Excolumn (e) of Part XVI-A | kemp | 13 _ t Purposes | |
| Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Worksheet in line 13 instructions to verify calculations.) THE XVI-B Relationship of Activities Explain below how each activity for which inc | ome is reported in | mplishment of Excolumn (e) of Part XVI-A | kemp | 13 _ t Purposes | |

12

| Part | | | | nsfers To | and Transactions a | and Relationships | 26-304294 With Noncharitab | | age 13 |
|---------------------------------------|-------------|--|-------------------------|---------------------|---|--------------------------------|----------------------------------|-------------------------|------------|
| 1 Dic | t the ore | | | of the follows | na with any other ergenizati | on described in section EO1 | I/o) of | Vac | No |
| | | _ | | | ng with any other organization | | 1(6) 01 | 163 | 110 |
| | | | • | | 27, relating to political organ | nizations | | | ŀ |
| | | rom the reporting found | ation to a noncharit | able exempt or | rganization of: | | | | |
| ٠. | Cash | | | | | | <u>1a(1</u> | _ | X |
| | Other | | | | | | 1a(2 | <u> </u> | X |
| | | sactions: | | | | | | | l |
| | | of assets to a noncharita | | | | | <u>1b(1</u> | Ц | <u> X</u> |
| ٠. | | ases of assets from a no | • | organization | | | 1b(2 |) | X |
| (3) | Rental | of facilities, equipment, | or other assets | | | | 1b(3 |) | X |
| (4) | Reimb | ursement arrangements | | | | | 1b(4 |) | X |
| (5) | Loans | or loan guarantees | | | | | 1b(5 |) | X |
| (6) | Perfor | mance of services or me | mbership or fundra | aising solicitation | ons | | 1b(6 | | X |
| c Sh | aring of | facilities, equipment, ma | ıılıng lists, other ass | sets, or paid en | nployees | | _ <u>1c</u> | | X |
| d If t | he answ | er to any of the above is | "Yes," complete the | following sch | edule. Column (b) should at | ways show the fair market v | value of the goods, other a | ssets, | |
| | | given by the reporting for the value of the goods, | | | ved less than fair market vali | ue in any transaction or sha | iring arrangement, show ir | | |
| (a) Line r | 10 | (b) Amount involved | (c) Name o | of noncharitabl | e exempt organization | (d) Description of trans | sfers, transactions, and sharing | arrangem | ents |
| · · · · · · · · · · · · · · · · · · · | | | | N/A | | | | | |
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| ın : | section (| dation directly or indirect 501(c) of the Code (other mplete the following sch | r than section 501(d | | e or more tax-exempt organi stion 527? | izations described | Ye | s 🔀 | No No |
| | | (a) Name of org | | | (b) Type of organization | (c) Des | cription of relationship | | |
| | | N/A | | | | | | | |
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| | | | | | | | | | |
| | Under | penalties of perjury, I declare | that I have examined th | his return, includi | ng accompanying schedules and | statements, and to the best of | my knowledge | | |
| Sign Here |) | 22 | · 0 | oreparer (other tha | an taxpayer) is based on all inform | PRESIDENT | shown belo | the prepa w (see in: | rer |
| | Sign | ature of officer or trustee | | Т | Date | Title | | | |
| | | Print/Type preparer's na | ıme | Preparer's s | signature | Date Check | <u> </u> | | |
| | | | _ | 耳. | As I am | | mployed | | |
| Paid | | LOUIS G. R | | Jani | [yunles | + 2 (1 (N) | P0047 | | <u>;</u> |
| Prep | | Firm's name ► RUS | SELL THO | MPSON T | SUTLER & HOUS | STON, LLP Firm | 's EIN ► 63-0965 | 059 | |

Phone no. 251-473-5550

Firm's address ▶ P.O. BOX 70106

MOBILE, AL 36670

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Name of the organization

Organization type (check one):

TONSMEIRE CHARITABLE FOUNDATION TRUST

Employer identification number

26-3042940

Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 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).

LHA 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)

Name of organization

Employer identification number

TONSMEIRE CHARITABLE FOUNDATION TRUST 2008

26-3042940

| Part I | * Contributors (see instructions). Use duplicate copies of Part I | ıf addıtıonal space is needed | |
|------------|---|-------------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | ARTHUR C. TONSMEIRE, III 14620 RIVER ROAD PENSACOLA, FL 32507 | \$\$83,350. | Person X Payroll |
| (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) |

Name of organization

Employer identification number

TONSMEIRE CHARITABLE FOUNDATION TRUST 2008

26-3042940

| Part II · | Noncash Prop | perty (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 |
|------------------------------|--|--|----------------------|
| _ | | | |
| (a) No. rom | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
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| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |

| | | | _ | |
|----------------|----------|--------|-----------|--------|
| Schedule B (Fo | orm 990, | 990-EZ | or 990-Pi | (2014) |

(d) Description of how gift is held

(d) Description of how gift is held

Relationship of transferor to transferee

Relationship of transferor to transferee

(a) No. from Part I

(a) No. from

Part I

(b) Purpose of gift

(b) Purpose of gift

Transferee's name, address, and ZIP + 4

Transferee's name, address, and ZIP + 4

(e) Transfer of gift

(c) Use of gift

(c) Use of gift

(e) Transfer of gift

| Part XV Supplementary Information Grants and Contributions Paid During the | | | | |
|--|--|----------------------|----------------------------------|--------|
| Recipient | If recipient is an individual, | Foundation | Durnous of great or | - " |
| Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of | Purpose of grant or contribution | Amount |
| | or substantial contributor | recipient | | |
| | | | | |
| OBILE BAYKEEPER | NONE | | UNRESTRICTED CONTRIBUTION | |
| OBILE, AL | | | | 1,00 |
| | | | | |
| ELC | NONE | | UNRESTRICTED CONTRIBUTION | |
| IRMINGHAM, AL | | | | 1,18 |
| | | | | : |
| T. JOSEPHS CATHOLIC CHURCH | NONE | | UNRESTRICTED CONTRIBUTION | |
| OBILE, AL | | | CONTRIBUTION | 1,09 |
| | | | | |
| UNIVERSITY OF SOUTH ALABAMA | NONE | | UNRESTRICTED | |
| WORLIE AT | | | CONTRIBUTION | 6.00 |
| OBILE, AL | | | | |
| NEEKS BAY FOUNDATION | NONE | | UNRESTRICTED | |
| WEEKS BAI FOUNDATION | HONE | | CONTRIBUTION | |
| FAIRHOPE, AL | | | | 4,18 |
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| Total from continuation sheets | | | | 13.4 |

| FORM 990-PF | OTHER E | EXPENSES STATEM | | PATEMENT 1 |
|-----------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| MISC ADMINISTRATION AND | | | | |
| SUPPLIES | 339. | 0. | | 0. |
| ACCOUNTING & LEGAL FEES | 633. | 0. | | 0. |
| INSURANCE | 27,274. | 0. | | 0. |
| MARKETING | 80. | 0. | | 0. |
| TO FORM 990-PF, PG 1, LN 23 | 28,326. | 0. | | 0. |