

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



## EXTENDED TO AUGUST 17, 2015 Return of Private Foundation

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

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

	For	aler	ndar year 2014 or tax year beginning		, and ending		
			f foundation			A Employer identification	number
			RY J AND ALOYIS L SONNI	EBORN			
			RITABLE FOUNDATION	26-3868045			
			and street (or PO box number if mail is not delivered to stree	et address)	Room/suite	B Telephone number	
			8 FAIRFAX RD N			251-410-67	00
			own, state or province, country, and ZIP or foreign	postal code		C if exemption application is p	ending, check here
			ILE, AL 36608		<del> </del>		
	G	neck	call that apply: Initial return		ormer public charity	D 1. Foreign organizations	s, cneck nere
			Final return Address change	Amended return		2 Foreign organizations me check here and attach co	eting the 85% test,
	<u> </u>	hook		Name change exempt private foundation			
		_	ection 4947(a)(1) nonexempt charitable trust	Other taxable private foundation	ation	E If private foundation sta under section 507(b)(1)	
			arket value of all assets at end of year   J   Account		Accrual		
			· 1 —	Other (specify)		F If the foundation is in a under section 507(b)(1)	
	,	\$	629 , 112 . (Part I, cold		basis)		(B), GHOOK HOTO
		ırt l	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
			(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
		1	Contributions, gifts, grants, etc., received	544,026.			
		2	Check X if the foundation is not required to attach Sch. B				
N		3	Interest on savings and temporary cash investments	102.	102.		STATEMENT 1
2015		4	Dividends and interest from securities	8,153.	8,153.		STATEMENT 2
<b>α</b> Ω		5a	Gross rents				
8		b	Net rental income or (loss)				<del></del>
2	ē	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	1,138.			
SEP	ē	b	assets on line 6a 4,023.		4 4 2 2		
	Revenue	7	Capital gain net income (from Part IV, line 2)		1,138.		
SCANNED		8	Net short-term capital gain				
		9	Income modifications Gross sales less returns				
K		10a					
Ś			Cross profit or (loss)				
		11	Other income				
		12	Total. Add lines 1 through 11	553,419.	9,393.	0.	
		13	Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
		14	Other employee salaries and wages				
		15	Pension plans, employee benefits				
	ses	16a	Legal fees				
<b>-</b> 75	Expens		Accounting fees STMT 3	3,070.	2,870.	0.	200.
Q	X	C	Other professional fees				
3	ţį	17	Interest Taxes				
ģ	and Administrative	18		625.	665.	0.	0.
Rec in Batching	inis	19	Depreciation and depletion SEP 1 0	2015			<u> </u>
<u> </u>	Ę	20					
'n€	Þ	21	Travel, conferences, and meetings				
က		22	Printing and publications Other expenses				. <del></del>
SEP	perating	•	Total operating and administrative				
<u>-</u>	era	-	expenses. Add lines 13 through 23	3,695.	3,535.	0.	200.
1 6 2015	Ö	25	Contributions, gifts, grants paid	8,700.	<u> </u>		200. 8,700.
묽			Total expenses and disbursements.				
			Add lines 24 and 25	12,395.	3,535.	_0.	8,900.
		27	Subtract line 26 from line 12:				
		a	Excess of revenue over expenses and disbursements	541,024.			
		b	Net investment income (if negative, enter -0-)		<u>5,858</u> .		
	4000		Adjusted net income (if negative, enter -0-)	<u> </u>		0.	
	4235 11-2	4-14	LHA For Paperwork Reduction Act Notice, see	instructions.			Form <b>990-PF</b> (2014)

1

	90-PF (2014) CHARITABLE FOUNDATION  Attached schedules and amounts in the description	Beginning of year		3868045 Page :
Part	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
T <sub>1</sub>	Cash - non-interest-bearing	(a) Book value	(b) Book Value	(U) Tall Market Value
	Savings and temporary cash investments	30,214.	8,060.	8,060.
	Accounts receivable	00,2220	0,000	0,000
	Less: allowance for doubtful accounts			
4	Pledges receivable ►			
	Less: allowance for doubtful accounts			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons			
7	Other notes and loans receivable			· -
1	Less: allowance for doubtful accounts ▶			
<u>ه</u> ع	Inventories for sale or use			
Assets	Prepaid expenses and deferred charges			
10a   مخ	investments - U.S. and state government obligations			
l b	Investments - corporate stock STMT 5	41,490.	604,744.	621,052.
0	Investments - corporate bonds			
11	Investments - land, buildings, and equipment basis			
	Less accumulated depreciation			
12	Investments - mortgage loans			
13	Investments - other			
14	Land, buildings, and equipment: basis ▶			
	Less accumulated depreciation			
15	Other assets (describe ►)			
16	Total assets (to be completed by all filers - see the			
	instructions. Also, see page 1, item I)	71,704.	612,804.	629,112.
17	Accounts payable and accrued expenses			
18	Grants payable			
န္မ 19	Deferred revenue			
Liabilities 51 20 21	Loans from officers, directors, trustees, and other disqualified persons			
.등 21	Mortgages and other notes payable			
22	Other liabilities (describe )			
23		0.	0.	
	Foundations that follow SFAS 117, check here			
ဖွ	and complete lines 24 through 26 and lines 30 and 31.			
g 24	Unrestricted			
E 25	Temporarily restricted			
26	Permanently restricted			
.들ㅣ	Foundations that do not follow SFAS 117, check here			
P	and complete lines 27 through 31.		_	
<u>ي 27</u>	Capital stock, trust principal, or current funds	0.	0.	
28	Paid-in or capital surplus, or land, bldg., and equipment fund	71,704.		
Net Assets or Fund Balances	Retained earnings, accumulated income, endowment, or other funds	71,704.	612,804. 612,804.	
<b>≥</b>  30	Total net assets or fund balances	/1,/04.	012,004.	
31	Total liabilities and net assets/fund balances	71,704.	612,804.	
Part	Analysis of Changes in Net Assets or Fund Ba	11ances		
	il net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
	st agree with end-of-year figure reported on prior year's return)		1	71,704. 541,024.
2 Ente	er amount from Part I, line 27a		2	541,024.

_			 
1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	 71,704.
2	Enter amount from Part I, line 27a	2	541,024.
3	Other increases not included in line 2 (itemize)   RETURN OF CAPITAL ADJUSTMENT	3	76.
4	Add lines 1, 2, and 3	4	612,804.
5	Decreases not included in line 2 (itemize) ▶	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	612,804.
_			000 DE

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)				(b) How acquired P - Purchase D - Donation		(c) Date acquir (mo., day, yr	ed .)	(d) Date sold (mo., day, yr.)	
1a CORPORATE STOC	KS					P	VARIOUS	3	VARIOUS
b CAPITAL GAINS	DIVID	ENDS							
_C									
_d_					<u> </u>		·		
e					<u> </u>		·		<u> </u>
(e) Gross sales price		preciation allowed or allowable)		t or other basis xpense of sale			(h) Gain or (e) plus (f) m		(g)
a 4,083.				3,48	5.				598.
ь 540.									540.
_C									
d									<del>-</del>
Complete only for speets shown			h = 4=	10/01/00	$\dashv$				
Complete only for assets showin							(I) Gains (Col. (h) ol. (k), but not les		
(i) F.M.V. as of 12/31/69		Adjusted basis s of 12/31/69		cess of col. (ı) col. (j), ıf any		J.	Losses (from		
_		0 01 12/0 1/00			-				E00
a									598. 540.
<u>b</u>						<del></del>			540.
d d					$\dashv$				
e					$\overline{}$				
		C !!	5	_	<del>\</del>				
2 Capital gain net income or (net ca	pıtal loss)	If gain, also enter If (loss), enter -0-			}	2			1,138.
3 Net short-term capital gain or (los			d (6):		٦				
If gain, also enter in Part I, line 8,	column (c).				<b> </b>		3.	T / A	
If (loss), enter -0- in Part I, line 8  Part V Qualification U	nder Se	ction 4940(e) for	Reduced	Tay on Not	lpv/	3   etment in		1/A	1
Was the foundation liable for the sect If <u>"Yes," the foundation does not qual</u> 1 Enter the appropriate amount in e	ıfy under se	ction 4940(e). Do not co	mplete this pa	rt.					Yes X No
	acii columii	····	istractions bei	ore making any e		•	<del></del>		(d)
(a) Base period years Calendar year (or tax year beginnii	ng in)	(b) Adjusted qualifying dist		Net value of no	(c) inchar		s (col. (	Distrib b) div	oution ratio rided by col. (c))
2013			0,360.			80,43			.128800
2012			2,482.			70,82			.035043
2011			3,150.			48,27			.065250
2010			588. 0.			26,24 19,65			.022407
2009			U • ]			19,00	<del>* • </del>		.000000
2 Total of line 1, column (d)	F b		l 0 b 5		- 6		2		.251500
3 Average distribution ratio for the the foundation has been in exister			ni iiile 2 0y 5,	or by the number	oi yea	113	3		.050300
4 Enter the net value of noncharitab	le-use asse	ts for 2014 from Part X, I	ine 5				4		314,493.
5 Multiply line 4 by line 3							5		15,819.
6 Enter 1% of net investment incom	ne (1% of Pa	art I, line 27b)					6		59.
7 Add lines 5 and 6	•	,					7		15,878.
	n Dark VIII to	no 4							
8 Enter qualifying distributions from If line 8 is equal to or greater than See the Part VI instructions.			1b, and comp	lete that part usin	g a 19	6 tax rate.	8		8,900.
See the Mart Of Incititations									

HARRY J AND ALOYIS L SONNEBORN Form 990-PF (2014) CHARITABLE FOUNDATION 26-3868045 Page 4 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) Part VI 1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) 117. **b** Domestic foundations that meet the section 4940(e) requirements in Part V, check here of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-5 Credits/Payments: a 2014 estimated tax payments and 2013 overpayment credited to 2014 b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6c d Backup withholding erroneously withheld ha 0. 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here \_\_\_\_ if Form 2220 is attached R 117. Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed SEE STATEMENT 9 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 11 Enter the amount of line 10 to be: Credited to 2015 estimated tax Refunded > 11 Part VII-A | Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in 1a X any political campaign? Х b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1b 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. X c Did the foundation file Form 1120-POL for this year? 10 d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0. (1) On the foundation. > \$ 0 . (2) On foundation managers. ▶ \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation X 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes X 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A b If "Yes," has it filed a tax return on Form 990-T for this year? 4b X 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 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 conflict with the state law X remain in the governing instrument? 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

Form **990-PF** (2014)

X

8Ь

10

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

of each state as required by General Instruction G? If "No," attach explanation

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)

year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

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

had not been removed from jeopardy before the first day of the tax year beginning in 2014?

Part VII-B   Statements Regarding Activities for which i	Form 4/20 May be F	required (contin	uea)					
5a During the year did the foundation pay or incur any amount to:								
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y6	s X No					
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire							
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., organizatio	n described in section							
4945(d)(4)(A)? (see instructions)		Ye	es 🗓 No					
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or	į					
the prevention of cruelty to children or animals?		Y6	s X No					
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations	ŀ					
section 53.4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b				
Organizations relying on a current notice regarding disaster assistance check h	iere		▶□ [					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ined						
expenditure responsibility for the grant?		/A 🔲 Ye	s 🗀 No					
If "Yes," attach the statement required by Regulations section 53.494								
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				-				
a personal benefit contract?	F-7 F	Y6	s X No					
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal henefit contract?			6b	x			
If "Yes" to 6b. file Form 8870.		•		-	<del> </del>			
7a At any time during the tax year, was the foundation a party to a prohibited tax s	chelter transaction?	□ v <sub>é</sub>	es X No					
b If "Yes," did the foundation receive any proceeds or have any net income attribute.			N/A	7b	$\vdash$			
Part VIII Information About Officers, Directors, Trust		nagers Highly						
Paid Employees, and Contractors			•					
1 List all officers, directors, trustees, foundation managers and their	compensation.							
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Ex	pense t, other			
(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	accoun	t, other ances			
ROBERT B. KING	DIRECTOR							
4226 BELLEVUE LANE								
MOBILE, AL 36608	1.00	0.	0.		0.			
	DIRECTOR		-					
4251 THE CEDARS								
MOBILE, AL 36608	1.00	0.	0.		0.			
	DIRECTOR							
3733 DUNSTAN COURT	DIRECTOR							
MOBILE, AL 36608	1.00	0.	0.		0.			
TRUSTMARK NATIONAL BANK	TRUSTEE			1				
107 ST FRANCIS ST	IKOSIEE			1				
MOBILE, AL 36652	2.00	0.	0.		0.			
2 Compensation of five highest-paid employees (other than those inc					<del>.</del>			
			(d) Contributions to	(e) Ex	pense			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deterred	accoun	t, other ances			
NOVE	devoted to position		compensation	allow	ances			
NONE	-							
		<del> </del>		-				
	-							
		-		1				
				<u> </u>				
	Į							
	_		<u> </u>	ļ				
	]							
			<u> </u>	<u> </u>				
Total number of other employees paid over \$50,000			<b>▶</b>		0			

וגעזי	מחדם	ים זם	FOIND	⊼ M T ∕ Nī
- DAI	K I 1 4	DIJE.		A I I L JIV

26-3868045

Page 7

3 Five highest-paid independent contractors for professional services. If none, enter "NON	NE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<del></del>		
Total number of others receiving over \$50,000 for professional services	<b>•</b>	(
Part IX-A Summary of Direct Charitable Activities	·	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical info		Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produced, e	310.	· · · · · · · · · · · · · · · · · · ·
1 <u>N/A</u>		
<del></del>		
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 year on lines $\boldsymbol{1}$	and 2.	Amount
1 <u>N/A</u>		
		<del> </del>
2		
All other program-related investments. See instructions.	-	
3		
Total. Add lines 1 through 3	<u> </u>	0.

CHARITABLE FOUNDATION

<u> </u>	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	ee 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	319,282.
b	Average of monthly cash balances	1b	
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	319,282.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	319,282.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,789.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	314,493.
6	Minimum investment return. Enter 5% of line 5	6	15,725.
Р	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	15,725.
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	117.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	15,608.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	15,608.
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	15,608.
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	8,900.
þ	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:		
a	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	8,900.
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	8,900.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for	the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	( <b>d)</b> 2014
1 Distributable amount for 2014 from Part XI,				
line 7				15,608.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	
b Total for prior years:				
3 Excess distributions carryover, if any, to 2014:		0.		
			İ	
a From 2009				
<b>b</b> From 2010				
c From 2011				
d From 2012				
e From 2013 4,748.	4 740			
f Total of lines 3a through e	4,748.			<del></del>
4 Qualifying distributions for 2014 from				
Part XII, line 4: ► \$ 8,900.			0	
a Applied to 2013, but not more than line 2a			0.	
b Applied to undistributed income of prior		^		
years (Election required - see instructions)		0.		<del></del>
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			0.000
d Applied to 2014 distributable amount	0	<del></del>	-	8,900.
e Remaining amount distributed out of corpus	0.			4 740
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	4,748.			4,748.
6 Enter the net total of each column as indicated below:			:	
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
<b>b</b> Prior years' undistributed income. Subtract			•	
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		_
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				1,960.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			<del></del>
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	0.			<del></del>
9 Excess distributions carryover to 2015.	_			
Subtract lines 7 and 8 from line 6a	0.	···		
10 Analysis of line 9:				
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013				
e Excess from 2014				5 000 DE (0044)

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

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

#### SEE STATEMENT 10

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

CHARITABLE FOUNDATION

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Yo	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or	Amount
Name and address (home or business)	or substantial contributor	status of recipient	contribution	7 imount
a Paid dunng the year				
MITCHELL CANCER INSTITUTE 1660 SPRINGHILL AVE MOBILE, AL 36606	NONE	501(C)(3)	CELEBRATE HOPE	7,500.
SPRING HILL COLLEGE FBO SHELLEY M. HUSBAND 4000 DAUPHIN STREET MOBILE, AL 36608	NONE	N/A	SCHOLARSHIP - SPRINGHILL COLLEGE	1,200.
Total	i	L	▶ 3a	8.700.
b Approved for future payment			54	8,700,
NONE				
Total .			<b>▶</b> 3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income			ided by section 512, 513, or 514	(e)		
	(a) Business	(b) Amount	(C) Exclu- sion	(d)	Related or exempt		
1 Program service revenue:	code	Aillouill	code	Amount	function income		
a							
b							
c							
d							
e							
1							
g Fees and contracts from government agencies			<u> </u>				
2 Membership dues and assessments					· -		
			-		_		
3 Interest on savings and temporary cash			1 1 4	100			
investments			14				
4 Dividends and interest from securities			14	8,153.			
5 Net rental income or (loss) from real estate:			ļ				
a Debt-financed property			<u> </u>				
b Not debt-financed property							
6 Net rental income or (loss) from personal							
property							
7 Other investment income							
8 Gain or (loss) from sales of assets other							
than inventory			18	1,138.			
9 Net income or (loss) from special events		- "					
10 Gross profit or (loss) from sales of inventory					· · · · · · · · · · · · · · · · · · ·		
11 Other revenue:					-		
	-						
a b			<del> </del>				
·					<del></del>		
d			<del>                                     </del>				
12 Subtotal. Add columns (b), (d), and (e)		0.		0 202			
		<u> </u>		9,393.	<u>0.</u> 9,393.		
13 Total. Add line 12, columns (b), (d), and (e)				13	3,333.		
(See worksheet in line 13 instructions to verify calculations.)	<del></del> -	·					
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes			
Line No. Explain below how each activity for which incom			contrit	buted importantly to the accom	nplishment of		
the foundation's exempt purposes (other than b	y providing fu	inds for such purposes).					
		<del></del>					
	<u>.</u>						
					<del></del> ·		
			-				
	<u>-</u> -						
403801							
423621 11-24-14					Form <b>990-PF</b> (2014)		

		TABLE FOU				26-386			ge 13
Part,			nsfers To a	and Transactions a	and Relations	hips With Nonch	aritable	•	
	Exempt Organ	_		<del></del>			1	V	<b>N</b> -
	the organization directly or indi					on 501(c) of		Yes	No
	Code (other than section 501(c				nizations?				
	nsfers from the reporting found	ation to a noncharita	able exempt or	ganization or.					77
٠,,	Cash						1a(1)		X
٠,	Other assets						1a(2)		X
	er transactions:						4.40		v
٠,	Sales of assets to a noncharita						1b(1)		_ <u>X</u> _
٠.	Purchases of assets from a no	·	organization				1b(2)		<u>X</u>
	Rental of facilities, equipment, Reimbursement arrangements						1b(3) 1b(4)		X
. ,	Loans or loan guarantees	,					1b(5)	-	X
٠,	Performance of services or me	emberchin or fundra	icina calicitatia	nne			1b(6)		X
	ring of facilities, equipment, ma						10(0)		X
	e answer to any of the above is			• •	ways show the fair m	arket value of the goods		ets	
	ervices given by the reporting f							,,,,	
	ımn (d) the value of the goods,				<b>,</b>	,			
(a) Line no	(b) Amount involved	(c) Name o	of noncharitable	e exempt organization	(d) Description	of transfers, transactions, an	d sharing ar	rangeme	nts
			N/A						
			•						
		ļ							
	<u> </u>								
		<del> </del>							
		1							
0- 1-1	a foundation directly or indirect	the offshotod south or	rolated to one	or more toy everent errors	antions described				
	ne foundation directly or indirec ection 501(c) of the Code (othe	•	•	• •	zations described	١	Yes	v	No
	ection 30 f(c) of the code (other es,* complete the following sch		)(0)) OF III SCU	11011 327		ι	163	L-23.	J 140
ייי ט י	(a) Name of org			(b) Type of organization		c) Description of relation	ship		
	N/A	<b>3</b>		(2) 1)	`	,,,,			
				<u> </u>		<del></del>			
		<del> </del>	-			<u> </u>			
	Λ								
	//			·					
	Under penalties of perjury, I declare						lay the IRS	discuss t	his
Sign	and belief, it is true, correct, and cor	molete Declaration of p	reparer (other tha	in taxpayer) is based on all inform	$\sim$	nas any knowledge re	turn with th	e prepare	er
Here		M		9/1117	> >0/2/6	2010/201/154	X Yes		No [
	Signature of officer or trustee			Date	Title	no roge			
	Print/Type preparer's na	ame 🔾 🗆	Preparer's s	ignature	Date	Check if PTIN	1		
						self- employed			
Paid				. HIERONYMU	08/28/15		0168		
Prepa	11111101111110	RONYMUS	CPAS, L	LC		Firm's EIN ► 47 – 1	19755	20	

Phone no. (251)680-9848

Firm's address ▶ PO BOX 7006

MOBILE, AL 36670

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	PORARY	CASH IN	VESTMENTS	STATEMENT 1	
SOURCE		REVE	(A) REVENUE NE PER BOOKS		(B) VESTMENT COME	(C) ADJUSTED NET INCOME	
TRUSTMARK NATIONAL		102.			102.		
TOTAL TO PART I, LINE 3			102.		102.	102.	
FORM 990-PF	DIVIDEND	S AND INTER	EST FRO	M SECUR	ITIES	STATEMENT 2	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	RE	(A) EVENUE BOOKS	(B) NET INVEST MENT INCOM		
TRUSTMARK NATIONAL BANK	8,693	. 54	0.	8,153.	8,15	8,153.	
TO PART I, LINE 4	8,693	. 54	0.	8,153.	8,153	8,153.	
FORM 990-PF		ACCOUNTI	NG FEES	3		STATEMENT 3	
DESCRIPTION		(A) EXPENSES PER BOOKS	(E NET IN MENT I	VEST-	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING FEES TRUSTEE FEES		1,183. 1,887.		983. 1,887.		200.	
TO FORM 990-PF, PG	1, LN 16B =	3,070.		2,870.	(	200.	
FORM 990-PF		TAX	TAXES ST		STATEMENT 4		
DESCRIPTION		(A) EXPENSES PER BOOKS	NET IN		(C) ADJUSTED NET INCOME		
FOREIGN TAXES PRIOR YEAR EXCISE T	AX	0. 625.		40. 625.		0. 0.	
TO FORM 990-PF, PG	1, LN 18	625.		665.	(	0.	
	<del>-</del>						

CORPORATE STOCK	STATEMENT		
	BOOK VALUE	FAIR MARKE	r
-	372,021. 102,723. 130,000.		98.
I, LINE 10B	604,744.	621,0	52.
TEREST AND PENALTIES		STATEMENT	6
PART VI		1:	17. 1. 2.
		1:	20.
F SUBSTANTIAL CONTRIB PART VII-A, LINE 10	UTORS	STATEMENT	7
ADDRESS			
	TEREST AND PENALTIES  PART VI  OF SUBSTANTIAL CONTRIB	372,021. 102,723. 130,000.  TI, LINE 10B 604,744.  PART VI  OF SUBSTANTIAL CONTRIBUTORS	372,021. 391,72 102,723. 100,89 130,000. 128,42  IT, LINE 10B 604,744. 621,09  PART VI 11  OF SUBSTANTIAL CONTRIBUTORS STATEMENT

FORM 990-PF	LATE PAYMENT PENALTY			STATEMENT		
DESCRIPTION	DATE	AMOUNT	BALANCE	MONTHS	PENALTY	
TAX DUE DATE FILED	05/15/15 08/15/15	117.	117. 117.	3	2.	
TOTAL LATE PAYMENT PENALTY					2.	

FORM 990-PF	LA	TE PAYMENT I		STAT	EMENT 9	
DESCRIPTION	DATE	AMOUNT	BALANCE	RATE	DAYS	INTEREST
TAX DUE DATE FILED	05/15/15 08/15/15	117.	117. 118.	.0300	92	1.
TOTAL LATE PAYMEN	NT INTEREST					1.

10

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

JOHN HENSLEY C/O TRUSTMARK NATIONAL BANK P.O. BOX 3067 MOBILE, AL 36652

TELEPHONE NUMBER NAME OF GRANT PROGRAM

251-438-6217

GRANT PROGRAM

#### FORM AND CONTENT OF APPLICATIONS

APPLICATIONS SHOULD BE SUBMITTED IN WRITTEN FORMAT AND INCLUDE A COVER LETTER, A PROPOSAL INCLUDING TIMELINE, BUDGET OUTLINE AND ESTIMATED IMPACT OF PROJECT ON PRIMARY AND SECONDARY STAKEHOLDERS (INCLUDING THE NUMBER OF INDIVIDUALS THAT WILL BENEFIT FROM THE FUNDING.) THE APPLICATION SHOULD ALSO INCLUDE A COPY OF THE ORGANIZATION'S IRS 501(C)(3) FEDERAL EXEMPTION LETTER, A LIST OF THE BOARD OF DIRECTORS AND SUPPORT MATERIALS (I.E., ANNUAL REPORTS, BROCHURES, FLYERS, PRESS CLIPPINGS, ETC.)

ANY SUBMISSION DEADLINES

RESTRICTIONS AND LIMITATIONS ON AWARDS

### NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

JOHN HENSLEY C/O TRUSTMARK NATIONAL BANK P.O. BOX 3067 MOBILE, AL 36652

TELEPHONE NUMBER NAME OF GRANT PROGRAM

251-438-6217 COLLEGE EDUCATION SCHOLARSHIP PROGRAM\_

#### FORM AND CONTENT OF APPLICATIONS

SCHOLARSHIPS WILL BE PUBLICIZED BY DIRECT NOTIFICATION OF THE ADMINISTRATIONS OF PUBLIC AND PRIVATE HIGH SCHOOLS WITHIN MOBILE COUNTY, AL. A WRITTEN SCHOLARSHIP APPLICATION WILL BE REQUIRED.

### ANY SUBMISSION DEADLINES

RESTRICTIONS AND LIMITATIONS ON AWARDS

18

## Form **8868** (Rev January 2014)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.lrs.gov/form8868 .

OMB No. 1545-1709

-	are filing for an Automatic 3-Month Extension, complete	-			ı	► X	
	are filing for an Additional (Not Automatic) 3-Month Ex						
	omplete Part II unless you have already been granted a		•	-			
	nic filing (e-file). You can electronically file Form 8868 if y			•		•	
•	to file Form 990-T), or an additional (not automatic) 3-more		•		•		
	o file any of the forms listed in Part I or Part II with the exc	•					
	I Benefit Contracts, which must be sent to the IRS in pap		(see instructions) For more details	on the elec	tronic filing of this	s form,	
	w.irs.gov/efile and click on e-file for Chanties & Nonprofits		whenit original (no conice no	adad\			
Part I	<del></del>						
•	ration required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and	complete			
Part I or						<b>-</b> L	
	corporations (including 1120-C filers), partnerships, REM come tax returns	ICs, and ti	rusts must use Form 7004 to reques	_			
	1	<u> </u>			r's identifying nu		
Type or	Name of exempt organization or other filer, see instru	Employer	Employer identification number (EIN) or				
print	HARRY J AND ALOYIS L SONNEI	SORN		26 2060045			
le by the	CHARITABLE FOUNDATION			26-3868045			
due date fo				Social sec	SN)		
eturn See							
nstruction		oreign add	ress, see instructions.				
	MOBILE, AL 36670						
Enter th	e Return code for the return that this application is for (file	a separa	te application for each return)			. 0 1	
	·····	I				<del></del>	
Applica	tion	Return	Application	Return Code			
s For		Code	Is For				
	0 or Form 990-EZ	01	Form 990-T (corporation)		07		
Form 99		02	Form 1041-A			08	
	20 (individual)	03	Form 4720 (other than individual)			09	
Form 99		04	Form 5227			10	
	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form 99	0-T (trust other than above)	06	Form 8870			12	
	TRUSTMARK NATIO						
	pooks are in the care of   107 ST FRANCIS	ST -					
	phone No ► <u>(251)438-6217</u>		Fax No 🕨		<del></del>	_	
	organization does not have an office or place of business				ı	<b>▶</b> ∟	
	s is for a Group Return, enter the organization's four digit	,			the whole group		
box 🕨					ers the extension	ıs for.	
1 Ir	equest an automatic 3-month (6 months for a corporation						
		t organiza	tion return for the organization name	ed above.	The extension		
	for the organization's return for.						
	X calendar year 2014 or						
	tax year beginning	, an	d ending		_		
2 If	the tax year entered in line 1 is for less than 12 months, c	heck reas	on: Initial return	Final retur	n		
L	Change in accounting period			<del></del>			
	this application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069,	enter the tentative tax, less any			^	
	onrefundable credits. See instructions.			3a	\$	0.	
	this application is for Forms 990-PF, 990-T, 4720, or 6069					^	
_	timated tax payments made. Include any prior year overp			3b	\$	<u> </u>	
	alance due. Subtract line 3b from line 3a. Include your pa	•	•			_	
	using EFTPS (Electronic Federal Tax Payment System)			3c	\$	0.	
	i. If you are going to make an electronic funds withdrawal	(direct de	bit) with this Form 8868, see Form 8	3453-EO ar	nd Form 8879-EO	for payment	
nstructi	UII3.						

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions. 423841 05-01-14

Form 8868 (Rev. 1-2014)