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For calendar year 2014, or tax year beginning 01-01-2014

Department of the Treasury

Internal Revenue Service

DLN: 93491128004115

, and ending 12-31-2014

OMB No 1545-0052

2014

Open to Public Inspection

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

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

F Information about 1 offin 350 FT and its instructions is at www.irs.gov/10/in/350p1.

A Employer identification number Name of foundation HUSSMAN FAMILY FOUNDATION 27-1167511 % CHARLES VAN DEVENTER **B** Telephone number (see instructions) Number and street (or P O box number if mail is not delivered to street address) PO BOX 2221 (501) 378-3428 Suite C If exemption application is pending, check here City or town, state or province, country, and ZIP or foreign postal code LITTLE ROCK, AR 72203 G Check all that apply Initial return Initial return of a former public charity **D 1.** Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% Address change Name change test, check here and attach computation E If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation J Accounting method ┌ Cash ┌ Accrual I Fair market value of all assets at end **F** If the foundation is in a 60-month termination **▶** □ under section 507(b)(1)(B), check here of year (from Part II, col. (c), Other (specify) line 16)▶\$ 1,041,198 (Part I, column (d) must be on cash basis.) Analysis of Revenue and Expenses (The Part I (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see for charitable expenses per books (cash basis only) Contributions, gifts, grants, etc , received (attach 33.812 Check ► ☐ If the foundation is **not** required to attach 672 672 Interest on savings and temporary cash investments 9,342 9,342 Dividends and interest from securities. . . Gross rents Net rental income or (loss)_ Net gain or (loss) from sale of assets not on line 10 49,127 Revenue Gross sales price for all assets on line 6a 134,528 Capital gain net income (from Part IV, line 2) . 49.127 Net short-term capital gain . . Income modifications . . 10a Gross sales less returns and allowances Less Cost of goods sold . . . Gross profit or (loss) (attach schedule) Other income (attach schedule) 11 12 Total. Add lines 1 through 11 . . 92.953 59.141 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages . . Operating and Administrative Expenses 15 Pension plans, employee benefits . . Legal fees (attach schedule). . . 16a 2.200 2.200 Accounting fees (attach schedule). Other professional fees (attach schedule) **17** Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion . 20 Travel, conferences, and meetings. 21 22 Printing and publications Other expenses (attach schedule) . . . 993 Total operating and administrative expenses. 24 Add lines 13 through 23 2.591 2.200 0 25 Contributions, gifts, grants paid. . . . 66,350 66,350 26 Total expenses and disbursements. Add lines 24 and 2,200 66,350 68,941 25 27 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements 24.012 Net investment income (if negative, enter -0-) 56,941 Adjusted net income (If negative, enter -0-)

Dа	rt II	Ralance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	
		Balance Sheets Attached schedules and amounts in the 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	51,384	,	
	2	Savings and temporary cash investments	658,748	613,430	613,430
	3	Accounts receivable -			
		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 (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) 🟲			
		Less allowance for doubtful accounts 🟲			
2	8	Inventories for sale or use			
sets	9	Prepaid expenses and deferred charges			
Д3	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	379,044	335,376	335,376
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans			
		Investments—other (attach schedule)			
		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			
	10	Instructions Also, see page 1, item I)	1,089,176	1,041,198	1,041,198
	17	Accounts payable and accrued expenses		_,,,,_,	
	18	Grants payable			
Š.	19	Deferred revenue			
abilities		Loans from officers, directors, trustees, and other disqualified persons	14,858	0	
ā	20	Mortgages and other notes payable (attach schedule)	14,030	0	
Ï	21				
		Other liabilities (describe) Tatal liabilities (add lines 17 through 33)	14,858	0	
	23	Total liabilities (add lines 17 through 22)	14,636	0	
Ş		Foundations that follow SFAS 117, check here			
or Fund Balances		and complete lines 24 through 26 and lines 30 and 31.			
) Jai	24	Unrestricted			
ă		Temporarily restricted			
핕	26	Permanently restricted			
Ŧ		Foundations that do not follow SFAS 117, check here 🕨 🔽			
		and complete lines 27 through 31.			
Assets	27	Capital stock, trust principal, or current funds			
SS	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	1,074,318	1,041,198	
Net	30	Total net assets or fund balances (see instructions)	1,074,318	1,041,198	
	31	Total liabilities and net assets/fund balances (see instructions)	1,089,176	1,041,198	
Pa	rt II	Analysis of Changes in Net Assets or Fund Balances			
1		Total net assets or fund balances at beginning of year—Part II, column	(a), line 30 (must a	gree	
		with end-of-year figure reported on prior year's return)		1	1,074,318
2		Enter amount from Part I, line 27a		2	24,012
3		Other increases not included in line 2 (itemize)		3	
4		Add lines 1, 2, and 3		4	1,098,330
5		Decreases not included in line 2 (itemize)			57,132
6		Total net assets or fund balances at end of year (line 4 minus line 5)—P	art II, column (b), l	ne 30 . 6	1,041,198

	0-PF (2014)		and for Tay on Tays	stances Taccas			Page 3
Part 1	<u>-</u>		ses for Tax on Inve		(b) How acquired		
			s) of property sold (e g , re ommon stock, 200 shs M	•	P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a	JP MORGAN - LONG T	TERM CO	VERED			2013-06-21	2014-09-16
b							
С							
d							
e							
(e)	Gross sales price		(f) Depreciation allowe (or allowable)	1 10	t or other basis xpense of sale		n or (loss) f) minus (g)
a	134	1,528	(or anomable)	pias c	85,40	+ ' ' ' ' '	49,127
		<u> </u>			,		,
с							
d							
<u>е</u>							
	nnlata anly for accots sh	NOWING GE	ain in column (h) and owne	d by the foundation	n on 1 2 /21 /60	(I) Carra (Cal	/h \
		lowing ga	(j) Adjusted basis		cess of col (i)		(h) gain minus less than -0-) or
(i) I	FMV as of 12/31/69		as of 12/31/69		col (j), if any		rom col (h))
а							49,127
ь							
С							
d							
e							
				If gaın, also enter	un Part I line 7 Ì	† †	
2	Capital gain net incom	e or (net	capital loss)	If (loss), enter -0		2	49,127
3	Net short-term capital	gaın or (loss) as defined in sectio	ns 1222(5) and (6	5)		
	If gain, also enter in Pa in Part I, line 8 .	art I, line	8, column (c) (see ınstru	ctions) If(loss),	enter -0 -		
Dowt V		. d C.		advised Tax a	n Not Tours	3	
Part \			ection 4940(e) for R				
(For opti	onal use by domestic pri	ıvate fou	ndations subject to the se	ection 4940(a) tax	on net investment	income)	
fsectio	n 4940(d)(2) applies, le	ave this	part blank				
Was the	foundation liable for the	section 4	4942 tax on the distributa	•		eriod?	┌ Yes ┌ No
			under section 4940(e) Do				
1 Ente	er the appropriate amour	nt in eaci	h column for each year, se	ee instructions bef	ore making any ent	ries	
Base	(a) period years Calendar		(b)	(с		(d) Distributio	
year (o	r tax year beginning in)	Adjuste	ed qualifying distributions	Net value of noncha	aritable-use assets	(col (b) divided	
	2013		38,882		1,066,666		0 036452
	2012		0		1,020,769		0 0
	2011						
	2010						
	Z009	(d)				2	0.026453
2	•				<u> </u>	2	0 036452
3			ne 5-year base period—div tion has been in existence			3	0 018226
4	Enter the net value of r	noncharit	table-use assets for 2014	from Part X, line	5	4	1,063,385
5	Multiply line 4 by line 3	3			[5	19,381
6	Enter 1% of net invest	ment inc	ome (1% of Part I, line 2	7b)		6	569
	Add lines Fond 6					7	19,950
7	Add lilles 5 alid 6						10,000
7 8			om Part XII, line 4		`.``.\	8	66,350

	990-PF (2014) **Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst			age 4
		ructio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here Fand enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			569
	here 🕨 🔽 and enter 1% of Part I, line 27b			
С	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			569
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			569
6	Credits/Payments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 140			
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 6d			
7	Total credits and payments Add lines 6a through 6d			140
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached.			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9			429
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 F Refunded 11			
Par	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		Yes	No
	it participate or intervene in any political campaign?	1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions			
	for definition)?	1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials			
_	published or distributed by the foundation in connection with the activities.			NI -
	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$\blue{\textbf} \\$			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
-	on foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		No
_	If "Yes," attach a detailed description of the activities.	_		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		No
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions] ,] ,	
	that conflict with the state law remain in the governing instrument?	6	Yes	
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	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney			
ט	General (or designate) of each state as required by General Instruction G? If "No," attach explanation.	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)		. 53	
-	or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)?			
	If "Yes," complete Part XIV	9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
	and addresses.	10		No

	Continued)		<u>'</u>	age S
	Tt VII-A Statements Regarding Activities (continued) At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
11	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
40				NO
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had	4.5		
4-	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ► <u>N/A</u>			
14	The books are in care of ►CHARLES VAN DEVENTER Telephone no ►(501)	378-	3577	
	Located at ► 115 E CAPITOL AVE LITTLE ROCK AR ZIP+4 ► 72201			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			► F
	and enter the amount of tax-exempt interest received or accrued during the year			- ,
	<u> </u>			T
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over	۱	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?....................... ア Yes 「 No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes 🔽 No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No			
	(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"			
	ıf the foundatıon agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days) Yes 🔽 No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		No
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2014?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2014?			
	If "Yes," list the years 🕨 20			
b	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		No
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	► 20, 20, 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
ь	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	If the foundation had excess business holdings in 2014.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	-		<u> </u>
_	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		No

Pa	t VIII-B State	ments Rega	rdin	a Activities for	· Wł	ich Form 4720	May	Be Required (cont	inueo	1)	r age o
	·			or incurany amoun				,			
	(1) Carry on propa	ganda, or other	rwise	attempt to influenc	e leg	ıslatıon (section 49	45(e	e))?	- No		
						section 4955), or to					
								┌ Y es ⋅	- No		
				travel, study, or otl			-	┌ Yes ि			
						etc , organization de	scrib				
								┌ Y es Ϝ	- No		
				religious, charitabl				,,			
									- No		
h								e exceptions described in			
_								instructions)?		5b	
_											
С	If the answer is "Ye	•	-			•			- _{No}		
								T Yes 「	NO		
_	If "Yes," attach the			_							
6a						or indirectly, to pay					
_	•							·			
Ь			ır, pa	y premiums, directl	y or ı	ndirectly, on a perso	onal	benefit contract?	•	6b	No
	If "Yes" to 6b, file Fo	orm 8870.									
7a						a prohibited tax shel					
_ь								the transaction?		7b	
Pa		ation About ntractors	t Off	icers, Director	s, Tı	rustees, Founda	atio	n Managers, Highly	Paid	Emp	loyees,
1	List all officers, dire		s, fou	ındat ion managers a	and t	heir compensation (see i	instructions).			
	·	•	1	Title, and average		c) Compensation	1	(d) Contributions to	(-) [
	(a) Name and ac	ldress	1	hours per week	(:	If not paid, enter		mployee benefit plans			e account, wances
_			de	voted to position		-0-)	and	deferred compensation			
See	Additional Data Tab	le	-								
			_								
2	Compensation of fiv	e highest-paid	emp	loyees (other than	thos	e included on line 1-	-see	instructions). If none, e	nter "N	ONE."	
				(b) Title, and aver	age			(d) Contributions to			
(a)	Name and address paid more than		/ee	hours per week	((c) Compensation	on	employee benefit plans and deferred			e account, wances
	para more man	450,000		devoted to positi	on			compensation	"	ici uni	wances
								·			
_											

Information About Officers, Directors, Truste	es, Foundation Managers, Hi	ghly Paid Employees,
and Contractors (continued) 3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	 VE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services.		•
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rele		r of Expenses
organizations and other beneficiaries served, conferences convened, research papers produ	ced, etc	
2		
3		
4		
Part IX-B Summary of Program-Related Investments (
Describe the two largest program-related investments made by the foundation during t	ne tax year on lines 1 and 2	A mount
<u>-</u>		
2		
All other program-related investments See instructions 3		
<u> </u>		
Total. Add lines 1 through 3		▶

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations. see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. 1 purposes 370.677 1a 1h 708.902 1c 1d 1.079.579 Reduction claimed for blockage or other factors reported on lines 1a and 1e 2 2 3 3 Subtract line 2 from line 1d. 1.079.579 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 16.194 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 5 1.063.385 5 53.169 **Distributable Amount** (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and Part XT certain foreign organizations check here $\blacktriangleright \Gamma$ and do not complete this part.) 53.169 1 Tax on investment income for 2014 from Part VI, line 5. 569 2a Income tax for 2014 (This does not include the tax from Part VI). . . 569 2c 3 3 52.600 4 4 5 5 52.600 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . 7 52.600 Part XIII Oualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1 Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. 1a 66.350 1b 0 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. 2 2 Ω 3 Amounts set aside for specific charitable projects that satisfy the O За O 3b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 66,350 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 569 65,781 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

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

	Cit Atti Unidistributed Income (see mstr	uctions)			
		(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1	Distributable amount for 2014 from Part XI, line 7	Corpus	Tears prior to 2015	2013	52,600
					32,000
	Undistributed income, if any, as of the end of 2014 Enter amount for 2013 only			14,215	
	Total for prior years 2012, 2011, 2010			11,213	
	Excess distributions carryover, if any, to 2014 From 2009				
	From 2010				
	From 2011				
	From 2012				
	From 2013				
_	Total of lines 3a through e		0		
	Qualifying distributions for 2014 from Part				
·	XII, line 4 > \$ 66,350				
а	Applied to 2013, but not more than line 2a			14,215	
	Applied to undistributed income of prior years				
_	(Election required—see instructions)				
C	Treated as distributions out of corpus (Election				
	required—see instructions)				
d	Applied to 2014 distributable amount				52,135
е	Remaining amount distributed out of corpus		0		
5	Excess distributions carryover applied to 2014		0		(
	(If an amount appears ın column (d), the				
	same amount must be shown in column (a).)				
6	Enter the net total of each column as				
_	indicated below:				
	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
D	Prior years' undistributed income Subtract				
c	Enter the amount of prior years' undistributed				
Ī	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
_	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable amount				
_	—see instructions				
٠	4a from line 2a Taxable amount—see				
	instructions				
f	Undistributed income for 2014 Subtract				
	lines 4d and 5 from line 1 This amount must				465
_	be distributed in 2015				
/	A mounts treated as distributions out of corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election may				
	be required - see instructions)				
8	Excess distributions carryover from 2009 not				<u></u>
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2015.		0		
10	Subtract lines 7 and 8 from line 6a		<u> </u>		
	Analysis of line 9 Excess from 2010				
	Excess from 2011				
	Excess from 2011				
	Excess from 2013				
	Excess from 2014 0				
_		ī		1	

L E	Private Operating Four	ndations (see ın	istructions and P	art VII-A, questi	on 9)	
	If the foundation has received a ruling or c foundation, and the ruling is effective for 2	letermination letter	that it is a private	operating		
ь	Check box to indicate whether the organiz	ation is a private op	perating foundation	described in section	on Г 4942(j)(3) (or Г 4942(j)(5
	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		, ,	, ,	, ,	
	85% of line 2a					
	Qualifying distributions from Part XII, line 4 for each year listed					
	A mounts included in line 2c not used directly for active conduct of exempt					
	activities					
	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
	omplete 3a, b, or c for the alternative test relied upon					
	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
	"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					_
İ	t XV Supplementary Information assets at any time during			the organizati	on had \$5,000	or more in
_	Information Regarding Foundation Manage	•	instructions.)			
	List any managers of the foundation who had before the close of any tax year (but only i	ave contributed moi				dation
	WALTER HUSSMAN JR					
	List any managers of the foundation who o ownership of a partnership or other entity)				lly large portion of t	he
	NONE					
	Information Regarding Contribution, Gran	t Gift Loan Schola	rshin etc Drogra	me:		
	Check here I if the foundation only ma unsolicited requests for funds If the found other conditions, complete items 2a, b, c,	kes contributions to lation makes gifts, o	o preselected char	ıtable organızatıons		
	The name, address, and telephone numbe	r or e-mail address	of the person to w	hom applications sh	ould be addressed	
	WALTER HUSSMAN JR PO BOX 2221 LITTLE ROCK, AR 72203 (501) 378-3402					
	The form in which applications should be s			· ·		E OF FUNDS
	Any submission deadlines		-			
	Any restrictions or limitations on awards,	such as by geogram	ohical areas, charit	able fields, kinds of	institutions, or oth	er
	factors	N DUDDO CEC 425	O D CA NIZA TION			

Name and address (home or business) any foundation manager or substantial contributor a Paid during the year any foundation manager or substantial contributor contribution contribution	Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	A mount
Total	Name and address (home or business)	any foundation manager	status of recipient	contribution	A mount
	a Paid during the year See Additional Data Table	any foundation manager or substantial contributor		contribution	Amount
	Total				66.251
		<u> </u>	<u></u>		66,350
ı					

Form 990-F	PF (2014) -A Analysis of Income-Produci	na Activitie				Page 12
	s amounts unless otherwise indicated	_	usiness income	Excluded by section	n 512, 513, or 514	(e)
	n service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exempt function income (See instructions)
с						
	and contracts from government agencies					
3 Interes	rship dues and assessments t on savings and temporary cash ments			14	672	
	ds and interest from securities tal income or (loss) from real estate			14	9,342	
a Debt-	financed property					
6 Net ren	ebt-financed property					
8 Gain or	nvestment income (loss) from sales of assets other than					
	ory			18	49,127	
	profit or (loss) from sales of inventory evenue a					
ь						
	ıl Add columns (b), (d), and (e).				59,141	
13 Total. A	dd line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify ca				13	59,141
	-B Relationship of Activities to	the Accom				
Line No.	Explain below how each activity for whic the accomplishment of the foundation's instructions)					

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Ves No.	Form 990-PF	(2014)										Pa	ge 13
section 501(c) of the Code (other than section 501(c)3) organizations of organizations? a Transfers from the reporting bundation to a noncharitable exempt organization of (2). Other assets. b Other transactions (3). Sales of assets to a noncharitable exempt organization. (2) Which has a fasset from a noncharitable exempt organization. (3) Service of fertilese, equipment, or other assets. 10(3) Service of fertilese, equipment, or other assets. 10(4) Rembursement arrangements. 10(5) Lonsor or long quarantees. 10(6) Performance of services or membership or fundrations solicitations. 10(7) Longo or long quarantees. 10(8) Performance of services or membership or fundrations solicitations. 10(9) Performance of services or membership or fundrations solicitations. 10(9) Longo or long quarantees. 10(9) Longo or long quarantees. 10(10) Longo or longo quar	Part XVI						action	s and F	Relationships	With			
a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash. (2) Other assets. (3) Chemisasets. (4) Sales of assets to a noncharitable exempt organization. (3) Seles of assets from a noncharitable exempt organization. (3) Seles of assets from a noncharitable exempt organization. (3) Rental officialities, equipment, or other assets. (4) Reimbursement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (7) Seles of assets to any of the above on "Yes," complete the following schedule: Culum (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation if the foundation directly or indirectly agree by the reporting foundation of the foundation directly or any of the above on "Yes," complete the following schedule: Culum (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation of the foundation directly or indirectly agree by the reporting foundation of the foundation directly or indirectly agree by the reporting foundation of the foundation directly or indirectly agree by the reporting foundation of the foundation directly or indirectly agree by the reporting foundation of the foundation directly or indirectly agree by the reporting foundation of the foundation directly or indirectly agree by the reporting foundation of the foundation directly or indirectly agree by the reporting foundation of the foundation directly or indirectly agree by the reporting foundation of the foundation directly or indirectly agree by the reporting foundation of the foundation directly or indirectly agree by the reporting foundation of the foundation directly or indirectly agree by the reporting foundation of the foundation of which prepare the say foundation of the proper foundation of the foundation of the foundation directly or the foundation of the foundation of the foundation of the foundation of the foundati		rganızatıon dırectly or ı	ndırectly e	ngage	ın any of	the following wit						Yes	No
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b othertransactions (1) Sales of assets to a nonchantable exempt organization. (2) Purchases of assets from a nonchantable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Remburgement arrangements. (5) Loans or loan quarantees. (6) Performance of services or membership or fundraising solicitations. (7) Sharing of facilities, equipment, mailing lists, other assets, or paid employees. (8) Enformance of services or membership or fundraising solicitations. (9) Interest only of the above is "Yes," complete the following schedule Column (b) should always show the fart market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services given by the reporting foundation if the foundation retrieved less than far market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line file (b) Amount involved (c) Rame of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements described in section 501(c) of the Code (other than section 501(c)(3)) or in section 5279. Yes Pio b If "Yes," complete the following schedule (a) Interest of purpose, in the following schedule and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all interests of the purposer's name Paid Preparer Pental Preparer AMBER SHERRILL Prim's address P Prim's address P Prim's address P Prim's address P													-
(2) Purchases of assets to a noncharitable exempt organization. (2) Purchases of assets from a noncharitable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Reimbursement arrangements. (5) Loans or loan guarantiess. (6) Performance of services or membership or fundraising solicitations. (7) Standard or loan guaranties. (8) Performance of services or membership or fundraising solicitations. (8) Performance of services or membership or fundraising solicitations. (9) Performance of services or membership or fundraising solicitations. (10) Intelligence of the control of the con											1a(2)		No
(2) Purchases of assets from a nonchartable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Rembursement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (7) Performance of services or membership or fundraising solicitations. (8) Performance of services or membership or fundraising solicitations. (8) Performance of services or membership or fundraising solicitations. (8) Performance of services or membership or fundraising solicitations. (8) Performance of services are the following schedule Column (6) should always show the far market value of the goods, other assets, or services where the following schedule column (7) the value of the goods, other assets, or services received in market value in any transparent, show in column (7) the value of the goods, other assets, or services received (8) Une No (9) Amount involved (9) Inside of noncharitable exempt organization (4) Description of transfors, transactions, and shaming amangements described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? (9) Name of organization (9) Name of organization (9) Name of organization of value of the goods, other severed organization (9) Name of organization (9) Name of organization (10) Name of organizati			ritable eve	mnt o	raanizatio	n					16/1)		No
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(4) Reimbursement arrangements.													
(S) Loans or loan guarantees. (S) Performance of services or membership or fundreising solicitations. (S) Performance of services or membership or fundreising solicitations. (S) Indio(S) No. It INDIO(S) No													
(6) Performance of services or membership or fundraising solicitations. (7) Performance of services or membership or fundraising solicitations. (8) Internal Services, equipment, imaling lists, other assets, or paid employees. (8) Internal Services of the specific production assets or services received (a) Line No (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements are considered to the goods, other assets, or services received (a) Line No (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements are considered in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?.											<u> </u>		
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees													No
All the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value in the production of the goods, other assets, or services upon by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) time No. (b) Amount involved. (c) Name of nonchantable exempt organization. (d) Description of transfers, transactions, and sharing arrangements. (b) Line No. (c) Amount involved. (c) Name of nonchantable exempt organization. (d) Description of transfers, transactions, and sharing arrangements. (a) Line No. (b) Amount involved. (c) Name of nonchantable exempt organization. (d) Description of transfers, transactions, and sharing arrangements. (a) Line No. (b) Amount involved. (c) Name of nonchantable exempt organization. (d) Description of transfers, transactions, and sharing arrangements. (a) Line No. (b) Amount involved. (d) Description of transfers, transactions, and sharing arrangements. (b) Amount involved. (c) Name of nonchantable exempt organization. (d) Description of transfers, transactions, and sharing arrangements. (a) Line No. (b) Amount involved. (d) Description of transfers, transactions, and sharing arrangements. (b) Line No. (e) Description of transfers, transactions, and sharing arrangements. (c) Line No. (e) Amount involved. (e) Name of nonchantable exempt organization. (d) Description of transfers, transactions, and sharing arrangements. (e) Line No. (e) Amount involved. (e) Description of transfers, transactions, and sharing arrangements. (e) Line No. (e) Amount involved in a report of transfers, transactions, and sharing arrangements. (e) Line No. (e) Amount involved in a report of transfers, transactions, and sharing arrangements. (f) Line No. (h) Description of transfers, transactions, and sharing arrangements. (g) Line No. (h) Description of transfers, transactions, and sharing											<u> </u>		No
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	of the goo in any tra	ods, other assets, or se ansaction or sharing arr	ervices give angement,	en by t show	he reporti in column	ng foundation I (d) the value of	f the fou the goo	ndation rods, other	eceived less than assets, or servic	faır marke es receive	et value ed		ntc
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	(a) Line No	(b) Amount involved	(c) Name (or nonci	папале ехе	empt organization	(u) i	Description	or transfers, transaction	ons, and sna	illig alla	ngemer	its
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?													
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?													
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described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	+												
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?													
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?													
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge ****** Signature of officer or trustee Date Title May the IRS discuss this return with the preparer shown below (see instr.)? ✓ Yes ☐ No Print/Type preparer's name AMBER SHERRILL Preparer's Signature Date 2015-05-05 Check if self-employed ▶ ☐ PTIN P00748683 Paid Preparer Use Discussion of preparer Date 2015-05-05 PTIN P00748683	described	d in section 501(c) of the complete the following	he Code (o schedule		nan sectio	n 501(c)(3)) or	ın sectio	-				ıs F	, No
the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge ****** Signature of officer or trustee Date Print/Type preparer's name AMBER SHERRILL Preparer's Signature Preparer's Signature Prim's name AMBER SHERRILL Prim's name BKD LLP Firm's address Firm's address Firm's address		, ,			,	, ,,							,
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the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge ****** Signature of officer or trustee Date Print/Type preparer's name AMBER SHERRILL Preparer's Signature Preparer's Signature Prim's name AMBER SHERRILL Prim's name BKD LLP Firm's address Firm's address Firm's address								+					
Signature of officer or trustee Date Title Print/Type preparer's name AMBER SHERRILL Preparer Signature Preparer's Signature Preparer Signature Preparer's Signature Preparer's Signature Preparer Signature Preparer's Signature Date 2015-05-05 Check if self- employed ▶ PTIN P00748683 Preparer Use Only Firm's address ▶	Sign the info	best of my knowledge a rmation of which prepa	and belief, i	ıt ıs trı	ue, correct	t, and complete				n taxpayeı	r) is bas	sed on	all
Print/Type preparer's name AMBER SHERRILL Print/Type preparer's Signature AMBER SHERRILL Print/Type preparer's Signature AMBER SHERRILL Preparer's Signature 2015-05-05 Firm's name BMD LLP Firm's address Firm'	Here	-				2015-05-05	-)			with the	preparer	shown	
Print/Type preparer's name AMBER SHERRILL Preparer's Signature 2015-05-05 employed F P00748683 Paid Preparer BKD LLP Firm's name F BKD LLP Firm's address F		Signature of officer or t	rustee			Date	,	Title			tr)? 🔽 <u>\</u>	′es	No
Preparer Use Only Firm's address F	•		name	Prepa	arer's Sıgn	ature		-05-05	l		07486	583	
Only Firm's address •	Preparer								Firm's EIN ►				
PO BOX 3667 LITTLE ROCK, AR 722033667 Phone no (501)372-1040		Firm's address ▶											
	Only	PO BOX 3667 LITT	LE ROCK,	AR 7.	22033667	7			Phone no (501)	372-104	10		

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense account,
	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allowances
WALTER HUSSMAN	PRESIDENT &	0	0	0
PO BOX 2221 LITTLE ROCK, AR 72203	TREASURER 1 0			
ROBENA HUSSMAN	VICE PRESIDENT &	0	0	0
PO BOX 2221 LITTLE ROCK, AR 72203	SECRETARY 1 0			
ELIZA GAINES	TRUSTEE	0	0	0
PO BOX 2221 LITTLE ROCK, AR 72203	1 0			
OLIVIA HUSSMAN	TRUSTEE	0	0	0
PO BOX 2221 LITTLE ROCK, AR 72203	1 0			
PALMER HUSSMAN	TRUSTEE	0	0	0
PO BOX 2221 LITTLE ROCK, AR 72203	1 0			

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
a Paid during the year	or substantial contributor			
IMMERSE ARKANSAS 6420 COLONEL GLENN RD 1 LITTLE ROCK, AR 72204	UNRELATED	PC	GENERAL DONATION	1,000
OUR HOUSE INC 302 E ROOSEVELT ROAD LITTLE ROCK, AR 72206	UNRELATED	PC	GENERAL DONATION	2,500
GLADNEY CENTER FOR ADOPTION 6300 JOHN RYAN DRIVE FORTH WORTH,TX 76132	UNRELATED	PC	GLADNEY CUP	6,350
UNC SCHOOL OF EDUCATION BOX 3365 CHAPEL HILL, NC 27599	UNRELATED	PC	GENERAL DONATION	1,000
HUMANE SOCIETY OF PULASKI COUNTY 14600 COLONEL GLENN ROAD LITTLE ROCK, AR 72210	UNRELATED	PC	GENERAL DONATION	1,000
ARKANSAS SYMPHONY ORCHESTRA 2417 NORTH TYLER STREET LITTLE ROCK, AR 72217	UNRELATED	PC	GENERAL DONATION	2,500
THE NATURE CONSERVANCY 601 N UNIVERSITY LITTLE ROCK, AR 72205	UNRELATED	PC	GENERAL DONATION	1,000
COMMUNITY HOSPITAL DEVELOPMENT 40 RYAN COURT SUITE 200 MONTEREY,CA 93940	UNRELATED	PC	GENERAL DONATION	2,500
ARKANSAS ARTS CENTER PO BOX 2137 LITTLE ROCK, AR 72203	UNRELATED	PC	GENERAL DONATION	10,000
EPISCOPAL COLLEGIATE SCHOOL FOUNDATION 1701 CANTRELL ROAD LITTLE ROCK, AR 72201	UNRELATED	PC	GENERAL SUPPORT	2,500
KIPP DELTA PUBLIC SCHOOLS 320 MISSOURI STREET HELENAWEST HELENA,AR 72342	UNRELATED	PC	GENERAL DONATION	2,500
UAMS 4301 W MARKHAM ST 554 LITTLE ROCK, AR 72205	UNRELATED	PC	GENERAL DONATION	1,000
LITTLE ROCK ANIMAL VILLAGE 4500 KRAMER STREET LITTLE ROCK, AR 72204	UNRELATED	PC	GENERAL DONATION	1,000
THE FIRST TEE OF CENTRAL ARKANSAS 1 FIRST TEE WAY LITTLE ROCK, AR 72204	UNRELATED	PC	GENERAL DONATION	1,000
FRIENDS OF ST BARTHOLOMEW'S ANGLICAN CHURCH PO BOX 6199 HAVEN,NJ 07704	UNRELATED	PC	1855 APPEAL SPONSORSHIP	2,500
Total				66,350

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

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	Amount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
HAZELDEN PO BOX 11 OS 3 CENTER CITY, MN 55012	UNRELATED	PC	GENERAL DONATION	1,000
UNC SCHOOL OF JOURNALISM CAMPUS BOX 3365 CHAPEL HILL, NC 27599	UNRELATED	PC	PROFESSORSHIP	2,500
LAWRENCEVILLE SCHOOL PO BOX 6125 LAWRENCEVILLE,NJ 08648	UNRELATED	PC	GENERAL DONATION	12,000
RIVER CITY MEN'S CHORUS 6834 CANTRELL RD 180 LITTLE RCOK, AR 72207	UNRELATED	PC	GENERAL DONATION	1,000
PRISON FELLOWSHIP PO BOX 1550 MERRIFIELD,VA 22116	UNRELATED	PC	GENERAL DONATION	1,000
ST FRANCIS HOUSE 2701 SOUTH ELM LITTLE ROCK, AR 72214	UNRELATED	PC	GENERAL DONATION	1,000
SANTA CATALINA SCHOOL 1500 MARK THOMAS DR MONTEREY,CA 93940	UNRELATED	PC	GENERAL DONATION	1,000
TIGER FOUNDATION 1599 SOUTH PARK STREET LITTLE ROCK, AR 72202	UNRELATED	PC	RESTORATION	1,000
ACCESS 10618 BRECKENRIDGE DR LITTLE ROCK, AR 72211	UNRELATED	PC	GENERAL DONATION	500
EVANS SCHOLARSHIP FOUNDATION ALOTIAN CLUB ROLAND,AR 72135	UNRELATED	PC	GENERAL DONATION	1,000
WALNUT CREEK CHURCH 15524 CHENAL PARKWAY LITTLE ROCK, AR 72211	UNRELATED	PC	GENERAL DONATION	2,500
COLUMBIA BUSINESS SCHOOL MAIL CODE 4524 NEW YORK,NY 10025	UNRELATED	PC	GENERAL DONATION	250
MD ANDERSON CANCER CENTER PO BOX 4464 HOUSTON,TX 77210	UNRELATED	PC	GENERAL DONATION	250
EPISCOPAL RELIEF AND DEVELOPMENT 815 SECOND AVENUE NEW YORK, NY 10017	UNRELATED		GENERAL DONATION	250
BISHOP'S DISCRETIONARY FUND 310 W 17TH STREET LITTLE ROCK, AR 72206	UNRELATED	PC	GENERAL DONATION	250
Total				66,350

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

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
STUDENT'S FIRST 825 K ST 2ND FL SACRAMENTO,CA 95814	UNRELATED	PC	GENERAL DONATION	2,500
Total				66,350

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As Filed Data

DLN: 93491128004115

OMB No 1545-0047

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

2014

		<u>###:#3:gov/10/1/100</u> .		
Name of the organization	on		Employer id	entification number
HUSSMAN FAMILY FO	UNDATION			
			27-116751	1
Organization type (ch	eck one)			

Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 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 other 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 ß% 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-EZ, line 1 Complete Parts I and II
Γ	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, of the prevention of cruelty to children or animals. Complete Parts I, II, and III
Γ	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 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

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Name of organization
HUSSMAN FAMILY FOUNDATION

Employer identification number 27-1167511

Contributors (see instructions) Use duplicate copies of Part I if additional space is needed (c) (d) (a) (b) Name, address, and ZIP + 4 **Total contributions** No. Type of contribution Person 굣 WALTER HUSSMAN Payroll PO BOX 2221 Noncash 33,812 LITTLE ROCK, AR72203 (Complete Part II for noncash contributions) (b) (d) (c) (a) **Total contributions** Name, address, and ZIP + 4 Type of contribution No. Person Payroll Noncash (Complete Part II for noncash contributions) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization
HUSSMAN FAMILY FOUNDATION
Employer identification number
27-1167511

art II Nonca	as h Property (see instructions) Use duplicate copies of Part II if additional spa	ce is	
n) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
No. om rt I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	

Schedule	B (Form 990, 990-EZ, or 990-PF) (2014)			Page 4
	organization N FAMILY FOUNDATION			Employer identification number
				27-1167511
Part III		om any one er the total of ructions)	contributor. Complete	cribed in section 501(c)(7), (8), or (10) e columns (a) through (e) and the following line thantable, etc., contributions of \$1,000 or less for \$
(a) No. from Part I	(b) Purpose of gift	(c)) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and Z		Transfer of gift Relatio	enship of transferor to transferee
				•
(a) No. from Part I	(b) Purpose of gift	(c	Use of gift	(d) Description of how gift is held
	Transferee's name, address, and Z		Transfer of gift	enship of transferor to transferee
			Netatio	manipor transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c	Use of gift	(d) Description of how gift is held
	Transferee's name, address, and Z		Transfer of gift Relatio	enship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c	Use of gift	(d) Description of how gift is held
	Transferee's name, address, and Z		Transfer of gift	enship of transferor to transferee

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As Filed Data -

DLN: 93491128004115

2014

Attachment

Form **8949**

Department of the Treasury
Internal Revenue Service

Name(s) shown on return

Sales and Other Dispositions of Capital Assets

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

27-1167511

Before you check Box A, B, or C below, check 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 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

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

1 (C) Short-term transactions no	,		<u> </u>				
1 (a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired (Mo , day, yr)	(c) Date sold or disposed (Mo, day, yr)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see <i>Column (e)</i> In the separate Instructions	If you enter a enter a See the se (f) Code(s) from	if any, to gain or loss an amount in column (g), code in column (f) eparate instructions (g) Amount of	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
					instructions	adjustment	with column (g)
							_
							
							<u> </u>
	each total her (If Box A abov checked), or lin	e and e ıs e 3 (ıf Box		enter in column (

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.

age 2

Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on other side ${\tt HUSSMAN}$ FAMILY FOUNDATION

Social securitynumber or taxpayer identification number

Before you check Box D, E, or F below, check 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.

- (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 (Mo , day, yr)	(c) Date sold or disposed (Mo, day, yr)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see <i>Column (e)</i> in the separate	If you enter a	If any, to gain or loss an amount in column (g), code in column (f) eparate instructions	(h) Gain or (loss). Subtract column (e) from column (d) and
		(****) ****// /* /	(,	instructions	Code(s) from	(g) Amount of adjustment	combine the result with column (g)
JP MORGAN -	06-21-2013	09-16-2014	134,528	(85,401)			49,127
2 Totals Add the amounts in colum (subtract negative amounts) Enter include on your Schedule D, line 8b	each total her (If Box D abov	e and e ıs					
checked), line 9 (If Box E above Is of Box F above Is checked)		🕨	134,528				49,127

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.

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Note: To capture the full content of this document, please select landscape mode (11" \times 8.5") when printing.

DLN: 93491128004115

TY 2014 Depreciation Schedule

Name: HUSSMAN FAMILY FOUNDATION

TY 2014 Investments Corporate Stock Schedule

Name: HUSSMAN FAMILY FOUNDATION

Name of Stock	End of Year Book Value	End of Year Fair Market Value
WALMART STORES INC.	309,168	309,168
WINDSTREAM CORP	0	0
SEADRILL LIMITED	26,208	26,208

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TY 2014 Other Decreases Schedule

Name: HUSSMAN FAMILY FOUNDATION

Description	Amount
UNREALIZED LOSS	57,132

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TY 2014 Other Expenses Schedule

Name: HUSSMAN FAMILY FOUNDATION

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK CHARGES	1			