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Department of the Treasury Internal Revenue Service

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

For calendar year 2014 or tax year beginning		, and ending		
Name of foundation			A Employer identification	n number
HOLLE FAMILY FOUNDATION			46-4166996	5
Number and street (or P O box number if mail is not delivered to street	t address)	Room/suite	B Telephone number	
4557 DOLLY RIDGE ROAD			205-967-25	594
City or town, state or province, country, and ZIP or foreign p	oostal code		C If exemption application is p	pending, check here
BIRMINGHAM, AL 35243			<u></u>	
G Check all that apply:	$\overline{}$	rmer public charity	D 1 Foreign organization	s, check here
Final return Address change	Amended return		2 Foreign organizations m check here and attach or	eeting the 85% test,
H Check type of organization: X Section 501(c)(3) e.	Name change		1	
Section 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation	E If private foundation sta under section 507(b)(1	
I Fair market value of all assets at end of year J Account		Accrual	1	
·	ther (specify)	71001001	F If the foundation is in a under section 507(b)(1	
▶\$ 1,551,652. (Part I, colu		pasis)	under section cor(b)(1	(b), check field
Part I 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	1,569,980.		N/A	
2 Check if the foundation is not required to attach Sch. B				
Interest on savings and temporary cash investments	5.	5.	 	STATEMENT 1
4 Dividends and interest from securities	2,433.	2,433.		STATEMENT 2
5a Gross rents		7		
b Net rental income or (loss)	1 004			
6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 1,904.	1,904.			
b Gross sales price for all 1,904. 7 Capital gain net income (from Part IV, line 2)	·	1,904.		
8 Net short-term capital gain		1,004.		
9 Income modifications				
Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss) ECEIVED				
11 Other incline				
12 Total Add lines 1 through 11	1,574,322.	4,342.		
13 Compensation officers, directors, trustees, etc.	0.	0,		0.
14 Other employee salaries and wages				
s rension plans, employed the list 125.	0 601			0
	8,691.	0.		0.
b Accounting fees STMT 4 c Other professional fees	6,380.			0.
			1	
17 Interest 18 Taxes STMT 5 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings	14.	14.	 	0.
19 Depreciation and depletion				
20 Occupancy			,	
22 Printing and publications				
23 Other expenses STMT 6	2,886.	2,036.		0.
夏 24 Total operating and administrative				
expenses Add lines 13 through 23	17,971.	2,050.		0.
25 Contributions, gifts, grants paid	13,000.			13,000.
26 Total expenses and disbursements.	20 071	0.050		12 000
Add lines 24 and 25 27 Subtract line 26 from line 12:	30,971.	2,050.		13,000.
	1,543,351.			
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)	T1040133T0	2,292.	-	<u> </u>
C Adjusted net income (if negative, enter -0-)			N/A	
				1

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

Fo	m 99	0-PF (2014) HOLLE FAMILY FOUNDATION		46-	4166996 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
Ë		Column snould be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing		20,238.	20,238.
		Savings and temporary cash investments			
	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			
	١_	disqualified persons			
	7	Other notes and loans receivable			
		Less; allowance for doubtful accounts			
Assets	8	Inventories for sale or use	-		
Ass	40.	Prepaid expenses and deferred charges			
•	1	Investments - U.S and state government obligations	0.	1 521 414	1 521 414
	1	Investments - corporate stock STMT 7	0.	1,531,414.	1,531,414.
		Investments - corporate bonds			
	''	Investments - land, buildings, and equipment basis			
	10	Less accumulated depreciation Investments - mortgage loans			
	12	Investments - other			
	14	Land, buildings, and equipment: basis			
	'"	Less accumulated deprecation			
	15	Other assets (describe ►	-		
	1	Total assets (to be completed by all filers - see the			
	"	instructions Also, see page 1, item I)	0.	1,551,652.	1,551,652.
_	17	Accounts payable and accrued expenses		1,331,032.	1,331,032.
	18	Grants payable			
_s	19	Deferred revenue			;
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			i
abil	21	Mortgages and other notes payable			
Ξ.	1	Other liabilities (describe)	-		
		,			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31			
Ses	24	Unrestricted			
lan	25	Temporarily restricted			
189	26	Permanently restricted			
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here			
ř		and complete lines 27 through 31	_		
ts	27	Capital stock, trust principal, or current funds	0.	0.	
sse	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
it A	29	Retained earnings, accumulated income, endowment, or other funds	0.	1,551,652.	
ž	30	Total net assets or fund balances	0.	1,551,652.	
		T. A. I. P. 1999	0	1 551 650	
_	31	Total liabilities and net assets/fund balances	0.1	1,551,652.	
P	art	Analysis of Changes in Net Assets or Fund B	alances		
<u> </u>	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
٠		st agree with end-of-year figure reported on prior year's return)		1	0.
2	•	amount from Part I, line 27a		2	1,543,351.
		r increases not included in line 2 (itemize) UNREALIZED	GAIN ON INVEST	}	8,301.
		lines 1, 2, and 3		4	1,551,652.
5	Decr	eases not included in line 2 (itemize)		5	0.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	1,551,652.
					Form 990-PF (2014)

		esses for Tax on Ir nd(s) of property sold (e.g		t Income	(b)	How ac	quired	(c) Date	acquired	(d) Date sold
2-story brick wa	arehouse;	or common stock, 200 sh	s. MLC Co.)			- Purc - Dona		` (mo., d	ay, yr.)	(mo., day, yr.)
1a CAPITAL GAINS	DIVI	DENDS			ļ					
<u>b</u>					-					
c d				· -· · · · · · · · · · · · · · · ·						
e					T					
(e) Gross sales price	(f) l	Depreciation allowed (or allowable)		st or other basis expense of sale					ain or (loss) s (f) minus (
a 1,904.										1,904.
<u>b</u>										
<u>c</u>										
e										
Complete only for assets shown	ng gain in	column (h) and owned by	the foundation	n on 12/31/69					ol. (h) gaın	
(i) F M.V as of 12/31/69	((j) Adjusted basis as of 12/31/69	(k) E	xcess of col. (1) col. (1), if any			co	l. (k), but r Losses	ot less thar (from col. (l	n -0-) or h))
a								-		1,904.
b								_		
C										
<u>d</u>		·								
<u>e</u>				_						
2 Capital gain net income or (net ca	pital loss)	If gain, also enter If (loss), enter -0	r in Part I, line - in Part I, line	7 e 7	black	2				1,904.
3 Net short-term capital gain or (los			nd (6):		`					
If gain, also enter in Part I, line 8,	column (c)			þ				NT / 7	
If (loss), enter -0- in Part I, line 8 Part V Qualification U	nder S	ection 4940(e) for	Reduced	Tax on Net	Inv	estm	ent Inc	come	N/A	
(For optional use by domestic private										N/A
If section 4940(d)(2) applies, leave t		•	, ,			,				·
Was the foundation liable for the sec					rıod?					Yes No
If "Yes," the foundation does not qua 1 Enter the appropriate amount in					ntries	 S.				
(a)		(b)			(c)			<u> </u>		(d)
Base period years Calendar year (or tax year beginni	ng in)	Adjusted qualifying dis	tributions	Net value of no			use assets		Distrib (col. (b) div	utión ratio ided by col. (c))
2013										
2012										
2011 2010								-		
2009										
									-	
2 Total of line 1, column (d)								2		
3 Average distribution ratio for the			on line 2 by 5,	, or by the number	of ye	ars				
the foundation has been in existe	nce if less	than 5 years						3		
4 Enter the net value of noncharitat	ole-use as:	sets for 2014 from Part X,	line 5					4		
5 Multiply line 4 by line 3								5		
6 Enter 1% of net investment incor	ne (1% of	Part I, line 2/b)						6		
7 Add lines 5 and 6								7		
8 Enter qualifying distributions from			45	alata di a		.		8		
If line 8 is equal to or greater than See the Part VI instructions.	ı iine 7, ch 	ieck the box in Part VI, line	1b, and com	piete that part usin	ng a 1	% tax r	ate.			

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	ert VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	148 -	see in	stru	ıctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	- 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 here and enter 1%	1				<u>46.</u>
	of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				_0.
-	Add lines 1 and 2	3				46.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5				46.
	Credits/Payments:					
	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 6a					
	Exempt foreign organizations - tax withheld at source					
	Tax paid with application for extension of time to file (Form 8868) 6c 100.					
	Backup withholding erroneously withheld 6d 6d					
	Total credits and payments. Add lines 6a through 6d	7			<u> </u>	00.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				54.
	Enter the amount of line 10 to be: Credited to 2015 estimated tax	11				0.
	rt VII-A Statements Regarding Activities		—-г			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	1			Yes	+
	any political campaign?			1a		X_
D	Did it spend more than \$100 during the year (either directly) for political purposes (see instructions for the definition)?		-	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	i or	l			
_	distributed by the foundation in connection with the activities					
	Did the foundation file Form 1120-POL for this year?		-	1c		X
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		ĺ			
_	(1) On the foundation. ► \$ 0.					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
^	managers. S 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		-	2		X
2	If "Yes," attach a detailed description of the activities					
J	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					.,
10	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		-	3		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	NT	/2	4a		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	TA \	/A	4b 5		X
ŭ	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:					
Ĭ	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 legislation. 	aw				
	remain in the governing instrument?			6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		-	7	X	
=	The management of the control of the		F	-	-23	\vdash
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) NONE					
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)		— ļ			
•	of each state as required by General Instruction G? If "No," attach explanation			8ь	х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendary	dar	 			
	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		x
10		TMT	8	10	х	
				200	DE 4	

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orm 990-PF (2014) HOLLE FAMILY FOUNDATION			46-4166	996	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es 🗶 No		
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indire	ectly,			
any voter registration drive?		Ye	es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	37	Ye	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	in described in section				
4945(d)(4)(A)? (see instructions)			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f				
the prevention of cruelty to children or animals?	, ,,		es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described i				
section 53.4945 or in a current notice regarding disaster assistance (see instru	·	g	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	•		▶ □		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		ined			ľ
expenditure responsibility for the grant?		Υ∈	es 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?	pay premiums on		es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	parennal hanafit contract?	11	ו שו במ	6ь	x
If "Yes" to 6b, file Form 8870.	Jersonal Denemi Contract?		-	00	
7a At any time during the tax year, was the foundation a party to a prohibited tax	shalter transaction?		es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attrib		16	ا N/A لما s: N/A	7b	_
Part VIII Information About Officers, Directors, Trust		nagare Highl		70	
Paid Employees, and Contractors	ees, roundation wa	magers, migni	y		
List all officers, directors, trustees, foundation managers and their	compensation.				· · ·
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid,	(d) Contributions to employee benefit plans and deferred	acc) Expense count, other llowances
EVERETT H. HOLLE	TRUSTEE	enter -0-)	compensation	41	nowances
4557 DOLLY RIDGE ROAD	IKOSIEE				
BIRMINGHAM, AL 35243	2.00	0.	0		0
WILLIAM C. MARTIN, III	TRUSTEE	0.	<u> </u>	•	0.
1804 CHARLOTTE DRIVE	IKOSIEE				
BIRMINGHAM, AL 35226	2.00	0.			0
PATRICK E. O'NEIL	TRUSTEE	0.	0	•	0.
5215 CHESTNUT STREET	TRUSTEE				
	1 200				0
ruscaloosa, al 35405	2.00	0.	0	•	0.
	-				
	-				
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1) If none	enter "NONE "	<u> </u>		
	T	T. TOTAL	(d) Contributions to	le) Expense
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	acc	Expense ount, other
NONE	devoted to position		compensation	ai	lowances
NONE	-				
		 			
	1				
			<u> </u>		
	1				
			<u> </u>		····
	-				
 					
	-				
F	<u> </u>	1	<u> </u>		
Total number of other employees paid over \$50,000			•		0

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Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, en	ter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant stanumber of organizations and other beneficiaries served, conferences convened, research papers p		Expenses
1N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		

Form 990-PF (2014) 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., purposes: 190,523. a Average monthly fair market value of securities 1a 4,592. Average of monthly cash balances 1b c Fair market value of all other assets 1c 195,115. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets Subtract line 2 from line 1d 3 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 2,927. 4 $19\overline{2}, 188.$ 5 Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4 Minimum investment return Enter 5% of line 5 6 9,609. Part XI | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here
and do not complete this part.) 9,609. Minimum investment return from Part X, line 6 Tax on investment income for 2014 from Part VI, line 5 46. 2a Income tax for 2014. (This does not include the tax from Part VI.) 2b Add lines 2a and 2b 2c 9,563. Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 Add lines 3 and 4 5 9,563. Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 563. Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 13,000. Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b 13,000. Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 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 Adjusted qualifying distributions Subtract line 5 from line 4 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

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

Corpus Years prior to 2013 2013 2 1 Distributable amount for 2014 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2014 a Enter amount for 2013 only b Total for prior years:	9,563.
line 7 2 Undistributed income, if any, as of the end of 2014 a Enter amount for 2013 only b Total for prior years:	9,563.
a Enter amount for 2013 only b Total for prior years:	270000
a Enter amount for 2013 only b Total for prior years:	
b Total for prior years: Co. Excess distributions carryover, if any, to 2014:	
3 Excess distributions carryover, if any, to 2014:	
a From 2009	
4.10112000	
b From 2010	
c From 2011	
d From 2012	
e From 2013 .	
f Total of lines 3a through e	
4 Qualifying distributions for 2014 from	
Part XII, line 4: ► \$ 13 , 000 .	
a Applied to 2013, but not more than line 2a O .	
b Applied to undistributed income of prior	
years (Election required - see instructions)	
c Treated as distributions out of corpus	
(Election required - see instructions) 0.	
d Applied to 2014 distributable amount	9,563.
e Remaining amount distributed out of corpus 3,437.	
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.
6 Enter the net total of each column as indicated below:	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	
b Prior years' undistributed income. Subtract	
line 4b from line 2b	
c Enter the amount of prior years'	
undistributed income for which a notice of	
deficiency has been issued, or on which the section 4942(a) tax has been previously	
assessed 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.	
f Undistributed income for 2014. Subtract	
lines 4d and 5 from line 1. This amount must	
be distributed in 2015	0.
7 Amounts treated as distributions out of	
corpus to satisfy requirements imposed by	
section 170(b)(1)(F) or 4942(g)(3) (Election	
may be required - see instructions) 0.	
8 Excess distributions carryover from 2009	
not applied on line 5 or line 7	
9 Excess distributions carryover to 2015	
Subtract lines 7 and 8 from line 6a 3, 437.	
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 3, 437.	
	90-PF (2014)

Part XIV Private Operating F	AMILY FOUND	ATION	A =::==t:== 0\		.66996 Page 10
			A, question 9)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective fo			▶ ∟_		
b Check box to indicate whether the found		ng foundation described i		4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(5) 2012	Prior 3 years	(4) 0044	(a) T -4-1
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					
b 85% of line 2a					
c Qualifying distributions from Part XII,			•		
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed	i				
c "Support" alternative test - enter:					- ·
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	f the foundati	on had \$5,000 or me	ore in assets
at any time during t	he year-see instr	uctions.)		,	
1 Information Regarding Foundatio	n Managers:				
a List any managers of the foundation who	-	than 2% of the total contr	ibutions received by	the foundation before the clo	se of any tax
year (but only if they have contributed m	iore than \$5,000). (See se	ection 507(d)(2).)	ĺ		,
EVERETT H. HOLLE					
b List any managers of the foundation who	o own 10% or more of the	e stock of a corporation (or an equally large p	ortion of the ownership of a p	artnership or
other entity) of which the foundation has	a 10% or greater interes	st.			•
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pre	ograms:		
Check here 🕨 🗓 if the foundation o				es not accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc. (see instructions) to indiv	iduals or organizations ui	nder other conditions	s, complete items 2a, b, c, and	ld
a The name, address, and telephone number	per or e-mail address of the	he person to whom applic	ations should be ad	dressed:	
		•			
b The form in which applications should b	e submitted and informat	ion and materials they sh	ould include:		
c Any submission deadlines:			-		
d Any restrictions or limitations on awards	such as hy generanhies	areae pharitable fields	kinds of institutions	or other factors:	
a rany restrictions of inflications on awards	, audii aa uy yeuyiapiilua	n areas, charitable licius,	amus oi msututions,	OF OTHER PACTORS.	

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2 0				
3 Grants and Contributions Paid During the Recipient	If recipient is an individual	Payment		
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
UNIVERSITY OF ALABAMA		DIIBLIC CHARTTY	AWARD FOR WRITING	
G-14 ROSE ADMINISTRATION BLDG.		TODDIC CIDACITI	COMPETITION.	
TUSCALOOSA AL 35487				13,000.
		+		
Total		_L	▶ 3a	13,000
b Approved for future payment				13,000
NONE				
		<u> </u>		
		ľ		
			<u> </u>	
Total			▶ 3b	0.

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Part XVI-A	Analysis of Income-Producing	Activities
	, maryoto of intectine i readoning	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

Enter gross amounts unless otherwise indicated.	Unrelated	business income		oy section 512, 513, or 514	(6)		
- · · · · · · · · · · · · · · · · · · ·	(a)	(b)	(c) Exclu-	(d)	Related or exempt		
1 Program service revenue:	Business code	Amount	sion	Amount	function income		
a							
b							
c							
d							
е							
1							
g Fees and contracts from government agencies							
2 Membership dues and assessments							
3 Interest on savings and temporary cash							
investments	L		14	5.			
4 Dividends and interest from securities			14	2,433.			
5 Net rental income or (loss) from real estate:							
a Debt-financed property							
b Not debt-financed property							
6 Net rental income or (loss) from personal							
property							
7 Other investment income					-		
8 Gain or (loss) from sales of assets other	[[-					
than inventory			14	1,904.			
9 Net income or (loss) from special events							
10 Gross profit or (loss) from sales of inventory							
11 Other revenue:							
a							
b							
C		1					
d							
e							
12 Subtotal. Add columns (b), (d), and (e)		(<u> </u>	4,342.	0		
13 Total. Add line 12, columns (b), (d), and (e)				13	4,342		
(See worksheet in line 13 instructions to verify calculations.)							
Part XVI-B Relationship of Activities to	the Acco	mplishment of	Exempt P	urposes			

	the foundation's exempt purposes (other than by providing funds for such purposes).
_	
	,
\dashv	
-+	
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1_	

orm <u>9</u> 90-PF (2	<u>2014) HOLLE</u>	<u>FAMILY FOUNDAT</u>	CION	<u>46-41669</u>	96	Page 13		
Part XVII	Information Re Exempt Organ		and Transactions an	nd Relationships With Noncharita				
1 Did the or	ganization directly or indi	rectly engage in any of the followin	ng with any other organization	described in section 501(c) of	Ye	es No		
the Code	(other than section 501(c))(3) organizations) or in section 52	27, relating to political organiz	ations?				
a Transfers	from the reporting foundation	ation to a noncharitable exempt or	ganization of:		ŀ			
(1) Cash								
(2) Other assets								
b Other tran								
	of assets to a noncharital				b(1)	<u> X</u>		
		ncharitable exempt organization			b(2)	X		
• •	al of facilities, equipment,				b(3)	X		
• •	bursement arrangements				b(4)	X		
	s or loan guarantees	embership or fundraising solicitation	ann	1	b(5)	X		
		uling lists, other assets, or paid em			b(6)	X		
				ــــ ays show the fair market value of the goods, othe	1c			
or service	s given by the reporting fo	oundation. If the foundation receiv	ed less than fair market value	in any transaction or sharing arrangement, show	v in			
	(b) Amount involved	other assets, or services received. (c) Name of noncharitable		(4) 5				
(a) Line no	(b) Amount involved	N/A	e exempt organization	(d) Description of transfers, transactions, and share	ng arrang	ements		
		I IV/A						
			**					
								
								
			<u> </u>					
		tly affiliated with, or related to, one r than section 501(c)(3)) or in sect			Yes [X No		
b If "Yes," co	omplete the following sch	edule.						
	(a) Name of org	anization	(b) Type of organization	(c) Description of relationship				
	N/A							
	. <u>.</u>	·						
 , 	\sim							
					IRS discu			
Sign L	1			return w	oth the pre pelow (see	parer instr)?		
Here	Julian	I Halle, Mile	10 AUG 2015	/ Clin · X	Yes	No		
Sign	nature of officer or trustee		Date /	Title				
•	Print/Type preparer's na	ame Preparar's s	Date Check If PTIN					
Daid			O/1/12 self- employed	_ =				
Paid Propagar	RICHARD J.		8/1/3 P000					
Preparer	Firm's name ► MCG	LADREY LLP	Firm's EIN ► 42-071	4325	,			
Use Only	F 1: 44 : 55							
		6 SUMMIT BOULEV						
	BI	RMINGHAM, AL 35	243	Phone no. 205-278				
				Form	990-P	PF (2014)		

423622 11-24-14

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Name of the organization

Employer identification number

НС	LLE FAMILY FOUNDATION	46-4166996							
Organization type (check o	Organization type (check one)								
Filers of:	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	1							
	527 political organization								
Form 990-PF	X 501(c)(3) exempt private foundation								
	4947(a)(1) nonexempt charitable trust treated as a private foundation								
	501(c)(3) taxable private foundation								
Note. Only a section 501(c)	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Spe	ecial Rule See instructions							
X For an organization	General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.								
Special Rules									
sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% si and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 1 or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the line 1 Complete Parts I and II	3, 16a, or 16b, and that received from							
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III									
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year									
but it must answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Sch Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or o the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	, , , , , , , , , , , , , , , , , , , ,							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization

Employer identification number

HOLLE FAMILY FOUNDATION

46-4166996

110111	TAMILI FOUNDATION	1 30	4100330
Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	EVERETT H. HOLLE 4557 DOLLY RIDGE ROAD BIRMINGHAM, AL 35243	\$\$.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	EVERETT H. HOLLE 4557 DOLLY RIDGE ROAD BIRMINGHAM, AL 35243	\$1,495,245.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)

Employer identification number

HOLLE FAMILY FOUNDATION

46-4166996

Part II	Noncash Property (see instructions) Use duplicate copies of F	art II if additional space is needed		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
2	PUBLICLY TRADED SECURITIES			
		\$ 1,495,245.	11/12/14	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
_		\$		
(a) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
_		\$		
(a) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
53 11-05-		\$	90, 990-EZ, or 990-PF) (

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Page 4 Name of organization Employer identification number HOLLE FAMILY FOUNDATION <u>46-4166996</u> Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for Part III the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from (b) Purpose of gift (d) Description of how gift is held (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	IPORARY	CASH IN	VESTMENTS	STATEMENT	1
SOURCE	REVE	(A) REVENUE N PER BOOKS		(B) VESTMENT COME	(C) ADJUSTED NET INCOME		
BBVA COMPASS		<u></u>	5.		5.		
TOTAL TO PART I, LI	NE 3				5.		
FORM 990-PF	DIVIDEND	S AND INTER	EST FRO	OM SECUR	ITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	RI	(A) EVENUE R BOOKS	(B) NET INVEST MENT INCOM		
BBVA COMPASS	4,337	1,90	4.	2,433.	2,433	•	
TO PART I, LINE 4 4,337		1,90	2,433.		2,433	•	
FORM 990-PF	· · · · · · · · · · · · · · · · · · ·	LEGAL	FEES			STATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS		B) NVEST- INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
LEGAL		8,691.	0.				0.
TO FM 990-PF, PG 1,	8,691.	0.		-		0.	
FORM 990-PF		ACCOUNTI	ACCOUNTING FEES			STATEMENT	4
DESCRIPTION		(A) EXPENSES PER BOOKS	NET II	B) NVEST- INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
ACCOUNTING	_	6,380.		0.			0.
TO FORM 990-PF, PG	1, LN 16B	6,380.	•	0.			0.
	=		-			=	

FORM 990-PF	XAT	ES		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME				
FOREIGN INCOME	14.	14	•	0.		
TO FORM 990-PF, PG 1, LN 18	14.	14	•	0.		
FORM 990-PF	OTHER E	XPENSES		STATEMENT 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME				
IRS USER FEE BANK FEES	850. 2,036.			0.		
TO FORM 990-PF, PG 1, LN 23	2,886.	2,036	•	0.		
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 7		
DESCRIPTION		В	OOK VALUE	FAIR MARKET VALUE		
US EQUITIES INTERNATIONAL EQUITIES			1,188,942.	1,188,942.		
TOTAL TO FORM 990-PF, PART II	I, LINE 10B		1,531,414.	1,531,414.		

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS
PART VII-A, LINE 10

STATEMENT

8

NAME OF CONTRIBUTOR

ADDRESS

EVERETT H. HOLLE

4557 DOLLY RIDGE ROAD BIRMINGHAM, AL 35243

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

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

internal He	venue Service	► Information about Form 886	8 and its	instructions is at www.irs.gov/tom	18868 .		
• If you	are filing for an Aut	omatic 3-Month Extension, complete	te only Pa	art I and check this box		. •	X
• If you	are filing for an Add	ditional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of	this form)		
Do not d	complete Part II unle	ss you have already been granted a	an automa	atic 3-month extension on a previous	sly filed For	rm 8868	
Electro	nic filing (e-file) . Yo	ou can electronically file Form 8868 if y	ou need a	a 3-month automatic extension of tir	ne to file (6	months for a corp	oration
required	I to file Form 990-T),	or an additional (not automatic) 3-moi	nth extens	sion of time. You can electronically f	ile Form 88	368 to request an e	extension
		ns listed in Part I or Part II with the exc					
		which must be sent to the IRS in pap					
		lick on e-file for Charities & Nonprofits		•		J	•
Part	Automati	c 3-Month Extension of Time	. Only s	submit original (no copies ne	eded).		
A corpo		e Form 990-T and requesting an auton					
Part I or		. •			•	•	
All other	corporations (inclui	ding 1120-C filers), partnerships, REM	ICs, and t	rusts must use Form 7004 to reque	st an exten	sion of time	_
	come tax returns			•	_	er's identifying nur	nber
Type or	Name of exemp	t organization or other filer, see instru	ctions.			identification num	
print	'						(,
•	HOLLE FA	MILY FOUNDATION				46-416699	96
File by the due date for	Al	and room or suite no. If a P.O. box, so	ee instruc	tions	Social se	curity number (SSN	
filing your	4557 DOT	LY RIDGE ROAD					7
return See instruction		est office, state, and ZIP code For a fo	reign add	ress, see instructions			
		IAM, AL 35243					
Enter th	e Return code for th	e return that this application is for (file	a separa	te application for each return)			0 4
		.,,					<u> </u>
Applica	tion		Return	Application			Return
ls For			Code	Is For			Code
	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 4	108(a) trust)	05	Form 6069			11
	0-T (trust other than		06	Form 8870			12
	,	EVERETT H. HOLI					
• The I	oooks are in the care	of ► 4557 DOLLY RIDO		AD - BIRMINGHAM, A	L 352	43	
	phone No. ► 205			Fax No		 	
	-	not have an office or place of business	s in the Ur				. []
	_	irn, enter the organization's four digit (·	If this is for	the whole group.	check this
		t of the group, check this box					
		3-month (6 months for a corporation					
	AUGUST 15	,	•	tion return for the organization name		The extension	
ıs	for the organization		J	3			
	X calendar year						
•	tax year begir		, an	d ending			
	, ,	<u> </u>		· · · · · · · · · · · · · · · · · · ·		_	
2 If	the tax vear entered	I in line 1 is for less than 12 months, cl	heck reas	on. Initial return	Final return	า	
Γ	Change in acco						•
3a If		r Forms 990-BL, 990-PF, 990-T, 4720,	or 6069	enter the tentative tax less any	1 1	 : -	
	onrefundable credits		0. 0000,	omor the terraine tax, 1000 arry	3a	\$	100.
		r Forms 990-PF, 990-T, 4720, or 6069	enter any	v refundable credits and	- 00		100.
		nts made Include any prior year overp			3ь	\$	0.
			-		35	Ψ	<u> </u>
	, , , , , , , , , , , , , , , , , , , ,						100.
		make an electronic funds withdrawal				_ T	
instructi		make an electronic funds withdrawar	(direct de	ony with this rottl 6000, see FORM 8	⊶oo•e∪ an		
LHA 423841 05-01-14	For Privacy Act and	d Paperwork Reduction Act Notice,	see instru	uctions.		Form 8868 (R	ev. 1-2014)