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DLN: 93491132034635

OMB No 1545-0052

Department of the Treasury

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 <u>www.irs.gov/form990pf</u>.

Return of Private Foundation

Interna	ıl Revenu	ue Service					Inspection
For	cale	endar year 2014, or tax year beginning 01-	01-2014	, a	nd ending 1	2-31-2014	
		undation			A Employer id	entification numbe	er
GE	NE & F	ELORENCE MONDAY FOUNDATION INC			62-1518306		
Num	ber and	d street (or P O box number if mail is not delivered to street address	s) Room/suite		B Telephone nu	mber (see instructior	ns)
		DR AVENÙE			(865) 525-0238		
Cıtv	or town	n, state or province, country, and ZIP or foreign postal code			C If exemption	application is pendin	a. check here ▶ □
		TN 37921			C II exemption	аррисацоп із репан	g, check here 📮 j
<u> </u>	200112	all that apply Finitial return Finitial return of a	former public charity		1		
G C	песк а	all that apply Initial return Initial return of a Final return Amended return	· · · · · · · · · · · · · · · · · · ·	У	_	ganizations, check he	• •
		Address change Name change			test, chec	rganizations meeting k here and attach co	mputation
		ype of organization				ındatıon status was t n 507(b)(1)(A), chec	
S	ection	n 4947(a)(1) nonexempt charitable trust Other taxa			1	,,,,,,	
		ket value of all assets at end from Part II, col. (c),	▼ Cash	rual		ation is in a 60-montl n 507(b)(1)(B), chec	
		from Part II, col. (c), ↑\$ 5,040,970	t be on cash basıs.)		ander section	1 307(0)(1)(0), click	K Here
Pa	rt I	Analysis of Revenue and Expenses (The	(a) Revenue and		1		(d) Disbursements
		total of amounts in columns (b), (c), and (d) may not `necessarily equal the amounts in column (a) (see	expenses per	(b) I	Net investment income	(c) Adjusted net income	for charitable purposes
		instructions))	books				(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach					
		schedule)	12,287				
	2	Check required to attach					
	_	Sch B					
	3	Interest on savings and temporary cash investments Dividends and interest from securities	169,961		169,961		
	5a	Gross rents	105,501		105,501		
	b	Net rental income or (loss)					
Φ	6a	Net gain or (loss) from sale of assets not on line 10	167,476				
Revenue	Ь	Gross sales price for all assets on line 6a 267,046					
₹	7	Capital gain net income (from Part IV, line 2)			167,476		
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold					
	C	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)			227 427		
	12	Total. Add lines 1 through 11	349,724		337,437		
	13 14	Other employee salaries and wages			0		
S.	15	Pension plans, employee benefits					
Š	16a	Legal fees (attach schedule)					
Expenses	Ь	Accounting fees (attach schedule)					
	c	Other professional fees (attach schedule)					
₫	17	Interest					
Administrative	18	Taxes (attach schedule) (see instructions)	5,729		0		C
	19	Depreciation (attach schedule) and depletion					
틀	20	Occupancy					
Q A	21	Travel, conferences, and meetings					
e E	22	Printing and publications			0		
Ξ	23	O ther expenses (attach schedule)	6,470		U		
rat	24	Add lines 13 through 23	12,199		0		ſ
Operating and	25	Contributions, gifts, grants paid	200,000		<u> </u>		200,000
_	26	Total expenses and disbursements. Add lines 24 and					
		25	212,199		0		200,000
	27	Subtract line 26 from line 12					
	a	Excess of revenue over expenses and disbursements	137,525				
	Ь	Net investment income (If negative, enter -0-)			337,437		
		Adjusted net income (if negative, enter -0-)	i				

Pa	rt II	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		(c) Fair Market Value
	1	Cash—non-interest-bearing	(a) BOOK Value	(D) BOOK	raide	(c) Full FlatRet Value
	2	Savings and temporary cash investments	46,468		1,360	1,360
	3	Accounts receivable	,			· · · · · · · · · · · · · · · · · · ·
	, J	Less allowance for doubtful accounts -				
	4	Pledges receivable -				
	7	Less allowance for doubtful accounts -				
	5	Grants receivable				
		Receivables due from officers, directors, trustees, and other				
	6	disqualified persons (attach schedule) (see instructions)				
	_	· · · · · · · · · · · · · · · · · · ·				
	7	Other notes and loans receivable (attach schedule)				
		Less allowance for doubtful accounts -				<u> </u>
sets	8	Inventories for sale or use				
υņ	9	Prepaid expenses and deferred charges				
∢		Investments—U S and state government obligations (attach schedule)	4 044 300	o501 o	262.400	4 262 400
	_	Investments—corporate stock (attach schedule)	4,041,388		,362,400	
	С	Investments—corporate bonds (attach schedule)	788,008	75)	677,210	677,210
	11	Investments—land, buildings, and equipment basis				
		Less accumulated depreciation (attach schedule)				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment basis				
		Less accumulated depreciation (attach schedule)				
	15	Other assets (describe)				
	16	Total assets (to be completed by all filers—see the				
		Instructions Also, see page 1, Item I)	4,875,864	5	5,040,970	5,040,970
	17	Accounts payable and accrued expenses				_
S	18	Grants payable	10,000		10,000	
abilities	19	Deferred revenue]
<u>=</u>	20	Loans from officers, directors, trustees, and other disqualified persons]
Lla	21	Mortgages and other notes payable (attach schedule)				_
	22	Other liabilities (describe)				_
	23	Total liabilities (add lines 17 through 22)	10,000		10,000	_
S		Foundations that follow SFAS 117, check here 🕨 🔽				
Fund Balance		and complete lines 24 through 26 and lines 30 and 31.				
lan	24	Unrestricted	4,865,864	5	,030,970	
Ba	25	Temporarily restricted				
пd	26	Permanently restricted				_
Fu		Foundations that do not follow SFAS 117, check here 🕨 🦵				
ŏ		and complete lines 27 through 31.				
£\$	27	Capital stock, trust principal, or current funds				
Assets	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds				
Net	30	Total net assets or fund balances (see instructions)	4,865,864	5	,030,970	
	31	Total liabilities and net assets/fund balances (see instructions)	4,875,864	5	,040,970	
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 aç	gree		
		with end-of-year figure reported on prior year's return)			1	4,865,864
2		Enter amount from Part I, line 27a		<u> </u>	2	137,525
3		Other increases not included in line 2 (itemize)			3	27,581
4		Add lines 1, 2, and 3			4	5,030,970
5		Decreases not included in line 2 (itemize) 🟲		_	5	0
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa	art II, column (b), lı	ne 30 .	6	5,030,970

the Part VI instructions

	90-PF (2014)	nd Losses for Tax on Inve	steers and Taxana			Page 3
Part 1	(a) List and describe th 2-story brick warehou	(b) How acquired P—Purchase	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
	MS GLBL SUB 4 75	,	,	D—Donation P	2009-07-28	2014-04-01
b	WF SUB NOTE 5 0			P	2009-07-28	2014-04-01
	CAPITAL GAINS DIVI	IDENDS		P	2009-03-20	2014-11-17
С	CAPITAL GAINS DIVI	IDEND3		<u> </u>		
d						
e		(6) Department allows	d (m) Coo	<u> </u>	(h) Co.m	(1)
(e	e) Gross sales price	(f) Depreciation allowe (or allowable)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	t or other basıs opense of sale		or (loss)) mınus (g)
а	50	,,000	· ·	49,57	· · · · · · · · · · · · · · · · · · ·	430
b	50	,,000		50,00	0	0
С	167	7,046				167,046
d						
е						
Co	mplete only for assets sho	owing gain in column (h) and owne	d by the foundation	n on 12/31/69	(I) Gains (Col	(h) gain minus
	FM V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exc	cess of col (1)		ess than -0-) or
а						430
b						0
С						167,046
d						
<u>е</u>						
3	·	e or (net capital loss) gain or (loss) as defined in sectio irt I, line 8, column (c) (see instru		in Part I, line 7	3	167,476
Part	V Oualification Un	nder Section 4940(e) for R	educed Tax or	Net Investme	<u> </u>	
		vate foundations subject to the se				
` '	,	,	ection 4940(a) tax	on het mvestment	ilicollie)	
Ifsection	on 4940(d)(2) applies, lea	ave this part blank				
		section 4942 tax on the distributa qualify under section 4940(e) Do			eriod?	Γ Yes Γ No
1 E n	ter the appropriate amoun	nt in each column for each year, so	ee instructions befo	ore making any ent	ries	
	(a) period years Calendar or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncha	ritable-use assets	(d) Distribution (col (b) divided	
	2013	214,000		4,569,610		0 046831
	2012	200,000		4,283,689		0 046689
	2011	200,000		4,090,301	-	0 048896
	2010	198,686		3,990,227		0 049793
	2009	230,752		4,168,571	_	0 055355
2		(d)			2	0 247564
3		tio for the 5-year base period—div e foundation has been in existence			3	0 049513
4	·	noncharitable-use assets for 2014	· · · · · · · · · · · · · · · · · · ·	_	4	4,920,336
5 Multiply line 4 by line 3		<u> </u>	5	243,621		
6		ment income (1% of Part I, line 2		_	6	3,374
7				`	7	246,995
8		utions from Part XII, line 4			8	200,000
ø		reater than line 7 check the hox				

3 Add lines 1 and 2. 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter-0-) 5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter-0 5 (credits/Payments 2 2014 estimated tax payments and 2013 overpayment credited to 2014	Form	990-PF (2014)		Р	age 4
on line 1 Date of nulling or determination letter instructions) Domestic Sundations that meet the section 4940(s) requirements in Part V, check here ▶ □ and enter 1% of Part 1, line 27b All other demostic foundations sine? 3% of line 27b Exempt foreign organizations enter 4% of Part 1, line 12, coll (b) Tox under section 311 (domestic section 4947(s)(1) trusts and taxable foundations only 0 thers 3 Add lines 1 and 2. Southit A (income) tax (domestic section 4947(s)(1) trusts and taxable foundations only 0 thers enter -0.) Tax based on investment income. Subtract line 4 from line 3 if zero or loss, enter -0. 5 5,74: Credits/Psymens 2 2.14 setting 4 (recome) tax (domestic section 4947(s)(1) trusts and taxable foundations only 0 thers enter -0.) 5 7ax based on investment income. Subtract line 4 from line 3 if zero or loss, enter -0. 5 6,74: Credits/Psymens 2 2.14 setting 4 frequency or loss, enter -0. 6 6 credits/Psymens 2 2.14 setting 4 frequency or loss, enter -0. 6 6 db C Tax poals with application for extension of time to file (Form 8568). 6 Enter any penalty for underpressed by withheld. 6 Gl 7 Total credits and payments. Add lines 5 and 6 is more than line 2. In enter amount ower 4. 9 1 3,86: Overpament, if line 7 is now than the total of lines 5 and 6, lenter amount ower 4. 9 1 10 Difference of the company of the c	Pai	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the in	structio	ns)	
Date of runing and determination letter	1a	Exempt operating foundations described in section 4940(d)(2), check here 🟲 🦵 and enter "N/A" 🔻 🗎			
b Domestic Undations that meet the section 4940(e) requirements in Part V, check 1					
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ₱ (Final inter 1 % of Bart 1, line 27 % of line 270 Exempt foreign organizations enter 4 % of Part, line 12, coi (b) 2 Tax under section 511 (comestic section 4947(a)(1) trusts and taxable foundations only 0 thers enter -0.) 3 Add lines 1 and 2. 4 Subtriet 6, (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only 0 thers enter -0.) 5 Tax based on investment income, Subtract line 4 from line 3 if zero or less, enter -0. 5 Tax based on investment income, Subtract line 4 from line 3 if zero or less, enter -0. 5 Tax based on investment income, Subtract line 4 from line 3 if zero or less, enter -0. 6 Credity/Payments 2 2 (credity/Payments 2 2 (credity/Payments 3 2014 estimated tax payments and 2013 overpayment credited to 2014 6 4 4,920 6 6 6 7 4,920 6 6 7 4 4,920 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7					
here ▶ Fand either 1% of Part I, inte 27b All other connects foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Fart I, line 12, col. (b) 1 as under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-1 3 Add lines 1 and 2. 3 Add lines 1 and 2. 3 Add lines 1 and 2. 4 Substite A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-1 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-1 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-1 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-1 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-1 6 Credits Payments 2 2 1 4 Credits Payments 2 2 1 4 Credits Payments 2 2 1 5 Add lines 6 and 1 as a constant income. Subtract line 4 from line 3 if zero or less, enter -0-1 5 Tax based on investment and 2013 overpayment credited to 2014 6 Exempt foreign organizations—Law withheld at source . 6 b 6 Credits Payments 2 2 1 4 Subtract and payments Add lines 6 a through 6d	h	·		_	740
c. All other consector foundations, enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, cal. (b) 2. Tax under section 511 (domestic section 4947(e)(1) trusts and taxable foundations only. Others enter -0	D	J 		,	5,749
Part I, Ine 12, col. (b) 2 Tax under section \$11 (dismestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-1 3 Add lines 1 and 2. 4 Subtride A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-1 5 Tax based on invertiment income. Subtract line 4 from line 3 if zero or less, enter -0 5 Tax based on invertiment income. Subtract line 4 from line 3 if zero or less, enter -0 5 Creded-y-Payments a 2014 estimated fax payments and 2013 overpayment credited to 2014 b Exempt Foreign organizations—rax withheld at source . 6 Tax paid with application for extension of time to file (Form 8888). 6 Cell 6 Backup withholding arroneously withheld. 7 Total credits and payments. Add lines 6 at through 6d. 6 Backup withholding arroneously withheld. 7 Total credits and payments. Add lines 6 at through 6d. 8 Enter any penalty for underpayment of estimated tax. Check here form 2220 is attached. 9 Tax due. If the total of lines 3 and 8 is more than hine 7, enter amount overpaid. 10 Overpayment. If line 7 is more than the total of lines 3 and 5, enter the amount overpaid. 11 Enter the amount of line 10 to be Credited to 2015 estimated tax. PREfunded. 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervens in any political campagna? 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervens in any political campagna? 13 Intervention 1 During the year (either directly or indirectly) for political jurposes (see I Instructions for definition?. 14 If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and capies of any materials published or distributed by the foundation are managed in the power of the activities of line or positical purposes (see I Instructions of 10 Hearth and the year of 10 Hearth and the year of 10 Hearth and the year of 10 Hearth		' I I			
2 1	С				
a Note in the content of the section 4947 (a) I trusts and taxable foundations only Others enter -0. 3 Add lines 1 and 2. 4 Subtitle A (income) tax (domestic section 4947 (a)XI trusts and taxable foundations only Others enter -0. 5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0. 5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0. 5 Credits/Payments 2 2014 estimated tax payments and 2013 overpayment credited to 2014 6 Exempt foreign organizations—tax withheld at source. 6 Credits/Payments 2 2014 estimated tax payments and 2013 overpayment credited to 2014 6 B Exempt foreign organizations—tax withheld at source. 6 Credits/Payments 6 D Exempt foreign organizations—tax withheld at source. 7 A 4,920 8 Enter any penalty for underpayment of stimated tax Check here fform 2220 is attached S S 1,350 8 Enter any penalty for underpayment of estimated tax Check here fform 2220 is attached S S 1,350 9 A 1,350 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. 11 Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded N 10 11 Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded N 10 12 Duning the tax year, did the foundation attempt to influence any national, state, or local legislation or did to participate or intervene in any political campaign? 13 Duning the tax year, did the foundation attempt to influence any national, state, or local legislation or did to participate or intervene in any political campaign? 14 A No No No No No No No No	2	, , , , , , , , , , , , , , , , , , ,			
4 Substite A (normer) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter-0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter-0 5 Credits/P ayments 2 014 estimated tax payments and 2013 overpayment credited to 2014 6s 4,920 b Exempt foreign organizations—tax withheld at source. 6 b C Tax paid with application for extension of time to file (Form 8868). 6 c C Tax paid with application for extension of time to file (Form 8868). 6 c C Tax paid with application for extension of time to file (Form 8868). 6 d Backup withholding eroneously withheld. 7 Total credits and payments Add lines 6 a through 6d. 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 overed. 9 1,861 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpakl. 10 Destrict the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 11 Enter the amount of ine 10 to be Credited to 2015 estimated tax. 12 Fortic tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 12 Fortic tax year, and the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 12 Fortic tax year, and the foundation attempt to influence any national, state, or local legislation or did it participate or distriction of the foundation in the control of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 13 Fortic tax has declared by the foundation of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 15 Fortic tax has declared or fortic tax o					0
senter-0-0 5 7 As based on investment income. Subtract line 4 from line 3 If zero or less, enter-0-0 5 5 6,7/41 Credits/Payments 2 2014 estimated tax payments and 2013 overpayment credited to 2014 6 8 4,920	3	Add lines 1 and 2		(749
Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0	4				0
a 2014 estimated tax payments and 2013 overpayment credited to 2014	_	cher o'			
a 20.44 estimated tax payments and 2013 overpayment credited to 2014 66 6.5 b Exempt foreign organizations—tax withheld at source					5,/49
b Exempt foreign organizations—tax withheld at source 6 b 6 c 6 c 6 d 8 d 8 ackup withholding erroneusly withheld . 6 d 9 c 8 d 8 ackup withholding erroneusly withheld . 6 d 9 c 9 d 4.9.21 d 8 ackup withholding erroneusly withheld . 6 d 9 c 9 d 4.9.21 d 8 Enter any penalty for underpayment of estimated tax Check here [if Form 2220 is attached 8 3.31 d 9 d 4.9.21 d 9 d 4.9.21 d 8 e 10 d 4.9.21 d 8 e 10 d 4.9.21 d 8 d 4.9.21 d 8 e 10 d 4.9.21 d 8 d 4.9.21	_				
c Tax paid with application for extension of time to file (Form 8868) . 6c d Backup withholding erroneously withheld					
a Backup withholding erroneously withheld. 7 Total credits and payments. Add lines 6 a through 6d. 8 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 ower and in the state of lines 5 and 8 is more than line 7, enter amount ower and in the state of lines 5 and 8 is more than line 7, enter amount ower and in the state of lines 5 and 8, enter the amount ower and in the state of lines 5 and 8, enter the amount ower and in the state of lines 5 and 8, enter the amount ower and in the state of the	Ь	· · · · · · · · · · · · · · · · · · ·			
Total credits and payments. Add lines 6a through 6d. Refer any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached. Refer any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached. Refer and it is a consistent of the construction of the construction of the construction. Refer and it is a construction of the construction of the construction of the construction. Refer and it is a construction of the con	C				
Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 3 3 3 3 3 3 3 3 3	d				
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owers. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. 11 Enter the amount of line 10 to be Ceretized to 2015 setsimated tax ▶ Refunded ▶ 1 Part VII-A Statements Regarding Activities 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 13 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 14 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 15 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did 16 It participate or intervene in any political campaign? 17 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did 18 During the tax year, did the foundation attempt to influence any national state and the activities and capital state and ca	7	Total credits and payments Add lines 6a through 6d		4	1,920
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. ▶ 10 11 Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ Refunded ▶ 11 12 13 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	8	Enter any penalty for underpayment of estimated tax. Check here T if Form 2220 is attached.			35
Part VII - ↑ Statements Regarding Activities 1a Durng the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a Durng the tax year, did the foundation attempt to influence any national, state, or local legislation or did 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 Ia 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. 1c Did the foundation file Form 1120-POL for this year? 1c Did the foundation file Form 1120-POL for this year? 2 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ s	9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9		:	1,864
During the tax year, did the foundation attempt to influence any national, state, or local legislation or did It participate or intervene in any political campaign? It is spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? 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 and copies of any materials published or distributed by the foundation in connection with the activities. C Did the foundation file Form 1120-POL for this year? C Did the foundation in Form 120-POL for this year? C Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation in S	10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10			
Test No. 1	11	Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded 11			
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? 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. C Did the foundation file Form 1120-PDL for this year? C Did the foundation file Form 1120-PDL for this year? C Did the foundation \$ 0 (2) On foundation managers \$ 0 (2) On the foundation managers \$ 0 (2) On the foundation managers \$ 0 (2) On foundation managers \$ 0 (2) On the foundation managers \$ 0 (2) On foundation foundati	Par	t VII-A Statements Regarding Activities			
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for definition)?. 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. c 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 • Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation • Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers • Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers • As 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 If "Yes," has it filed a tax return on Form 990-T for this year? 5 No If "Yes," attach the statement required by General Instruction T. Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or end to the province of the pro		ıt participate or intervene in any political campaign?	. 1a		No
for definition)?. 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. c 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 • Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation • Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers • Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers • As 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 If "Yes," has it filed a tax return on Form 990-T for this year? 5 No If "Yes," attach the statement required by General Instruction T. Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or end to the province of the pro	b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions			
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published or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ 0 (2) On foundation managers ▶ \$ 0 e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ 0 14 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 No 16 "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? 4b Dif "Yes," has it filed a tax return on Form 990-T for this year? 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 No 16 If "Yes," attach the statement required by General Instruction 7. 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 so that no mandatory directions that conflict with the state law remain in the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument so that no mandatory directions and Part XV. 7 Yes 8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ TN 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) of each state as required by General Instruction G? If "No," atta					
c Did the foundation file Form 1120-POL for this year?. d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ 0 (2) On foundation managers ▶ \$ 0 Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ 0 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 No If "res," 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 "res," attach a conformed copy of the changes 3 No If "ves," has it filed a tax return on Form 990-T for this year? 4a No If "yes," attach the statement required by General Instruction T. 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) ▶ IN 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) 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()(3) or 4942()(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions					
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e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ 0 2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		· · · · · · · · · · · · · · · · · · ·			
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$	_				
on foundation managers ▶ \$	e				
Has the foundation engaged in any activities that have not previously been reported to the IRS?	_				
### If "Yes," attach a detailed description of the activities. ### Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	2		,		No
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			1		
of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	_				
Did the foundation have unrelated business gross income of \$1,000 or more during the year?	3				
b If "Yes," has it filed a tax return on Form 990-T for this year?	_				
Was there a liquidation, termination, dissolution, or substantial contraction during the year?	_				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?					
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?	5		. 5		No
 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?		If "Yes," attach the statement required by General Instruction T.			
 ■ 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		- [, [i
that conflict with the state law remain in the governing instrument?					
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		By state legislation that effectively amends the governing instrument so that no mandatory directions			
and Part XV			. 6	Yes	
Ba Enter the states to which the foundation reports or with which it is registered (see instructions) ▶TN 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) of each state as required by General Instruction G? If "No," attach explanation. 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV	7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c),			
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) of each state as required by General Instruction G? If "No," attach explanation. 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV		and Part XV.	. 7	Yes	
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) of each state as required by General Instruction G? If "No," attach explanation. 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV	8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
General (or designate) of each state as required by General Instruction G? If "No," attach explanation. 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV		► <u>TN</u>			
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV	b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney			
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		General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	Yes	
If "Yes," complete Part XIV	9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)			
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names		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
and addresses	10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
		and addresses.	. 10		No

Pai	rt VII-A Statements Regarding Activities (continued)			- 3
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) 🕮	11	Yes	
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►N/A		1.00	<u> </u>
14	The books are in care of ►KENNETH WHOLBERT Telephone no ►(865)) 525	-0238	
	Located at ► 1810 AILOR AVENUE KNOXVILLE TN ZIP+4 ► 37921			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			▶┌
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over		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			1
	Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pai	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
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)? T Yes 🔽 No			
	(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 V 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		
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2014?	1c		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? Yes № No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 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		
C	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			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation			
	or disqualified persons after 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			
	ıf 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			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		No

Pa	rt VII-B Sta	tements Rega	rdir	ng Activities for	Wh	ich Form 4720	May	Be Required (cont	inued	')	1 age O
5a	During the year	did the foundation	n pay	or incur any amoun	t to						
	(1) Carry on pro	paganda, or othe	rwise	attempt to influenc	e leg	ıslatıon (section 49	45(e	:)) [?]	√ No		
	(2) Influence th	e outcome of any	spec	ıfıc publıc election (see	section 4955), or to	car	ry			
	on, directly	or indirectly, any	voter	registration drive?.				┌ Yes ┌	√ No		
	(3) Provide a gi	ant to an individu	al for	travel, study, or oth	ners	ımılar purposes?		☐ Yes Ϝ	√ No		
	(4) Provide a gi	ant to an organiza	ition	other than a charita	ble,	etc , organization de	scrib	ped			
	ın section 4	945(d)(4)(A)? (s	ee ins	structions)				┌ Yes ┌	√ No		
	(5) Provide for a	any purpose other	than	religious, charitabl	e, sc	ientific, literary, or					
	educational	purposes, or for t	he pr	evention of cruelty t	to ch	ıldren or anımals?.			√ No		
b	If any answer is	"Yes" to 5a(1)-(5), d	ıd any of the transad	tion	s fail to qualify unde	r the	exceptions described in			
	Regulations sec	tion 53 4945 or i	nac	urrent notice regard	ling c	lısaster assıstance	(see	instructions)?		5b	
	O rganizations r	elyıng on a curren	t not	ice regarding disast	eras	sistance check her	e	▶↑	- [
С				4), does the foundat							
								T Yes [- _{No}		
				y Regulations section							
6a				ceive any funds, dire			prer	niums on			
									√ No		
ь	•							benefit contract?		6b	No
	If "Yes" to 6b, fi			,	•	., .			ŀ		-
7a	•		vas tl	ne foundation a party	v to a	nrohibited tax shel	lter ti	ransaction? TYes F	- No		
								the transaction?		7b	
								n Managers, Highly			ovees
Pa		Contractors			-,	ustees, i suitae			· u.u	р.	, , , ,
1	List all officers,	directors, trustee	s, foı	ındation managers a	nd t	heir compensation (see i	nstructions).			
				Title, and average		c) Compensation		(d) Contributions to	(e) E	xpense	account,
	(a) Name and	daddress	1	hours per week evoted to position	(1	(f not paid, enter -0-)		mployee benefit plans I deferred compensation			wances
See	Addıtıonal Data T	ahle		.voccu to position		• ,	una	deterred compensation			
	Additional Data 1	чыс	1								
			┨								
									-		
			-								
2	Compensation of	five highest-paid	emp	loyees (other than	thos	e included on line 1-	-see	instructions). If none, er	nter "N	ONE."	
/	. N			(b) Title, and aver	age			(d) Contributions to	(-) [
(a		ss of each emplo nan \$50,000	/ee	hours per week		(c) Compensation	on	employee benefit plans and deferred	1	•	account, wances
	F	····· + · · / · · · /		devoted to positi	on			compensation			
NON	1E										
				1							
									-		
								<u> </u>			
Tota	ı l number of other	employees paid o	vers	\$50,000					1		0

Part VIII Information About Officers, Directors, Transcription and Contractors (continued)	Paid Employees,	
3 Five highest-paid independent contractors for professional serv	ices (see instructions). If none, enter "NONE".	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional servi	ces	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Inclu	do relevant statistical information such as the number of	
organizations and other beneficiaries served, conferences convened, research paper		Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investmen		
Describe the two largest program-related investments made by the foundation d	luring the tax year on lines 1 and 2	A mount
1		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		0

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 1a 4.936.974 1h 58.291 1c 1d 4.995.265 Reduction claimed for blockage or other factors reported on lines 1a and 1e 2 2 3 3 Subtract line 2 from line 1d. 4.995.265 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 74.929 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 5 4.920.336 5 246.017 **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.) 246.017 1 Tax on investment income for 2014 from Part VI, line 5. 6.749 2a Income tax for 2014 (This does not include the tax from Part VI). . . 6.749 2c 3 3 239.268 4 Λ 4 5 5 239.268 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . 7 239.268 7 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 200,000 1b 0 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. 2 2 3 Amounts set aside for specific charitable projects that satisfy the За. 3b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 200,000 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 200,000 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

P	art XIII Undistributed Income (see instr	uctions)			
	·	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1	Distributable amount for 2014 from Part XI, line 7				239,268
2	Undistributed income, if any, as of the end of 2014				
а	Enter amount for 2013 only			86,491	
b	Total for prior years 20, 20, 20		0		
3	Excess distributions carryover, if any, to 2014				
а	From 2009				
b	From 2010				
C	From 2011				
d	From 2012				
	From 2013				
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2014 from Part				
	XII, line 4 🕨 \$				
а	Applied to 2013, but not more than line 2a			86,491	
b	Applied to undistributed income of prior years		0		
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)	0			
d	Applied to 2014 distributable amount				113,509
е	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2014	0			(
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as				
	indicated below:				
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
b	Prior years' undistributed income Subtract line 4b from line 2b		0		
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a) tax has been previously assessed		0		
d	Subtract line 6c from line 6b Taxable amount				
•	—see instructions		0		
е	Undistributed income for 2013 Subtract line				
	4a from line 2a Taxable amount—see				
	instructions			0	
f	Undistributed income for 2014 Subtract				
	lines 4d and 5 from line 1 This amount must be distributed in 2015				125,759
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election may	0			
	be required - see instructions)				
8	Excess distributions carryover from 2009 not	0			
_	applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2015.				
9	Subtract lines 7 and 8 from line 6a	0			
10	Analysis of line 9				
	Excess from 2010				
	Excess from 2011	1			
	Excess from 2012	1			
	Excess from 2013	1			
	Excess from 2014]			

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

- a The name, address, and telephone number or email address of the person to whom applications should be addressed
- b The form in which applications should be submitted and information and materials they should include
- c Any submission deadlines
- **d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

3 Grants and Contributions Paid		proved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year See Additional Data Table	or substantial contributor	recipient		
			<u> </u>	200.00
Total	<u></u>	<u> </u>		200,000
		1	1	

Form 990-F						Page 12
	-A Analysis of Income-Produci			T =		(-)
_	s amounts unless otherwise indicated	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	(e) Related or exempt function income (See instructions)
b						motractions y
fg Fees a 2 Membe 3 Interes	and contracts from government agencies rship dues and assessments					
4 Dividen5 Net rena Debt-b Not de6 Net renpropert	nds and interest from securities			14	169,961	
8 Gain or invento 9 Net inc	 7 Other investment income 8 Gain or (loss) from sales of assets other than inventory 9 Net income or (loss) from special events 0 Gross profit or (loss) from sales of inventory 			14	167,476	
11 Other r b c d	revenue a					
12 Subtota 13 Total. A	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Forksheet in line 13 instructions to verify c			1	337,437 L3	•
Part XVI	Explain below how each activity for which the accomplishment of the foundation's instructions)	h income is re	ported ın column (e) of Part XVI-A c	ontributed importa	

Form 990-P	F (2014)										Рa	ge 13
Part XVI	Information R Noncharitable					actio	ns and I	Relationships	With			
section !	organization directly or i 501(c) of the Code (oth	indirectly e	engage	ın any of	the following wit						Yes	No
organıza												
	s from the reporting fou											.
	h									1a(1)		No
	erassets									1a(2)		No
b Other tra	ansactions es of assets to a noncha	vritable ov	amnt o	rannizatio	n					15/1\		No
	chases of assets from a											No
	tal of facilities, equipme											No
	mbursement arrangemei									1b(4)		No
	ns or loan guarantees.									1b(5)		No
	ormance of services or r									1b(6)		No
	of facilities, equipment,									─		No
of the go	swer to any of the above ods, other assets, or se ansaction or sharing arr (b) Amount involved	ervices giv rangement,	en by t , show	the reporti in column	ng foundation I	f the fou f the god	undation r ods, other	eceived less than	fair marko es receive	et value ed	1	nte
(a) Line No	(b) Amount involved	(C) Name	OT HOTIC	папале ех	empt organization	(u)	Description	or transfers, transact	ions, and sna	anny ana	ngemei	its
describe	undation directly or indi d in section 501(c) of t complete the following (a) Name of organizatio	he Code (o schedule		nan sectio	•	ın sectı	-		· · · · ·	. 厂 Y€	s F	, No
the	der penalties of perjury, be best of my knowledge a prmation of which prepa ******	and belief,	ıt ıs tr	ue, correc					n taxpaye		sed on	all
•	Signature of officer or t	rustee			Date	- •	Tıtle		below	preparer tr)? √ \		
	T					Date		Check if self-	PTIN	<i>,</i> , , ,		
	Print/Type preparer's KIM YOUNG	name	Prepa	arer's Sign	nature			employed •		007453	372	
Paid Preparei Use		°C						Firm's EIN ► 62	-114215	5		
Only	Firm's address ► 315 N CEDAR BLUFF TN 37923	315 N CEDAR BLUFF RD SUITE 200 KNOXVILLE, Phone no (865)769-0660							50			

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances	
RON CUNNINGHAM	PRESIDENT	0	0	0	
PO BOX 1 KNOXVILLE,TN 37901	1 00				
WILLIAM E MONDAY III	VICE PRESIDENT/	0	0	0	
208 BUSBEE ROAD KNOXVILLE,TN 37920	DIRECTOR 1 00				
KENNETH W HOLBERT	TREASURER	0	0	0	
PO BOX 1 KNOXVILLE,TN 37901	1 00				
JOAN VESTAL ELLIS	SECRETARY	0	0	0	
7914 GLEASON DR APT 1053 KNOXVILLE,TN 37919	1 00				
JAMES S MONDAY	DIRECTOR	0	0	0	
208 BUSBEE ROAD KNOXVILLE,TN 37920	0 00				
ROBERT W MONDAY	DIRECTOR	0	0	0	
902 KERMIT DRIVE KNOXVILLE,TN 37912	0 00				
JOHN LACY MD	DIRECTOR	0	0	0	
1932 ALCOA HWY KNOXVILLE,TN 37920	0 00				
JAMES STOGNER	DIRECTOR	0	0	0	
1044 CRAIGLAND COURT KNOXVILLE,TN 37919	0 00				
WILLIAM E MONDAY IV	DIRECTOR	0	0	0	
208 BUSBEE ROAD KNOXVILLE,TN 37920	0 00				

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 any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
FREE MEDICAL CLINIC OF OAK RIDGE 116 E DIVISION RD OAK RIDGE,TN 37830		PUBLIC CHARITY	FREE PRIMARY MEDICAL CARE FOR THE ELIGIBLE UNINUSURED IN ANDERSON, MORGAN AND ROANE COUNTY TN	2,500
FREEDOM CHRISTIAN ACADEMY 4615 ASHEVILLE HWY KNOXVILLE,TN 37914		PUBLIC CHARITY	K-8 SCHOOL OFERING A BIBLE CENTERED EDUCATION	5,000
IJAMS NATURE CENTER 2915 ISLAND HOME AVE KNOXVILLE,TN 37920		PUBLIC CHARITY	PROTECTED WILDLIFE HABITAT	5,000
SHANGRI LA THERAPEUTIC ACADEMY OF RIDING 11800 US- 11 LENOIR CITY,TN 37772		PUBLIC CHARITY	FOSTER PERSONAL ACHIEVEMENT BY PROVIDING THERAPEUTIC EXPERIENCES WITH HORSE RELATED ACTIVITES	5,340
STEPS HOUSE INC 75 BOGGS AVE KNOXVILLE,TN 37920		PUBLIC CHARITY	TRANSITIONAL HOUSING FOR MEN AND HOMELESS VETERANS WHO SUFFER FROM SUBSTANCE ABUSE	5,000
BIG BROTHERS BIG SISTERS OF EAST TENNESSEE 119 W SUMMITT HILL DRIVE STE 101 KNOXVILLE,TN 37902	NONE	PUBLIC CHARITY	ENABLE YOUTH TO REALIZE THEIR POTENTIAL	7,500
BOYS & GIRLS CLUB OF THE TN VALLEY 220 CARRICK STREET KNOXVILLE,TN 37917	NONE	PUBLIC CHARITY	ENHANCE THE LIVES OF YOUTHS	15,000
FAMILY CARE FOUNDATION 1373 MARRON VALLEY ROAD KNOXVILLE,TN 37917	NONE	PUBLIC CHARITY	HUMANITARIAN RELIEF WORLDWIDE FOR NEEDY FAMILIES	12,000
FOUNDATION CITY ARTS CENTER INC 213 HOTEL AVENUE KNOXVILLE,TN 37918	NONE	PUBLIC CHARITY	PROVIDE VISUAL ARTS EXPERIENCES AND OPPORTUNITIES TO THE PUBLIC	1,000
KNOXVILLE ACADEMY OF MEDICINE 115 SUBURBAN ROAD KNOXVILLE,TN 37923	NONE	PUBLIC CHARITY	PROVIDE HEALTH CARE FOR UNINSURED LOWINCOME RESIDENT	10,000
KNOXVILLE HABITAT FOR HUMANITY 1501 WASHINGTON AVE KNOXVILLE,TN 37917	NONE	PUBLIC CHARITY	FUNDING FOR SIMPLE, DECENT AFFORDABLE HOUSING FOR LO	15,660
KNOXVILLE LEADERSHIP FOUNDATION 901 E SUMMIT HILL DRIVE KNOXVILLE,TN 37915	NONE	PUBLIC CHARITY	PROMOTE LEADERSHIP IN THE KNOXVILLE AREA	7,500
LADIES OF CHARITY OF KNOXVILLE 1031 N CENTRAL STREET KNOXVILLE,TN 37917	NONE	PUBLIC CHARITY	PROVIDE PROPER NUTRITION TO HUNGRY ADULTS AND CHILDREN	5,000
MENTAL HEALTH ASSOCIATION OF EAST TN PO BOX 32731 KNOXVILLE,TN 37931	NONE	PUBLIC CHARITY	YOUTH SUICIDE PREVENTION PROGRAM	5,000
OPEN ARMS MINISTRY PO BOX 422 CARRYVILLE,TN 37714	NONE	PUBLIC CHARITY	PROVIDE SUPPORT TO COMMUNITY	10,000
Total				200,000

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				
SECOND HARVEST FOOD BANK OF EAST TN 922 DELAWARE AVE KNOXVILLE,TN 37921	NONE	PUBLIC CHARITY	SUPPORT NEEDY WITH FOOD	12,000
THE FIRST TEE OF GREATER KNOXVILLE 2351 DANDRIDGE AVENUE KNOXVILLE,TN 37915	NONE	PUBLIC CHARITY	PROGRAMS TO HELP CHILDREN TO OVERCOME CONFLICTS AND CHALLENGES	7,500
VOLUNTEER MINISTRY CENTER 103 S GAY STREET KNOXVILLE,TN 37901	NONE	PUBLIC CHARITY	SUPPORT PROGRAMS FOR THE HOMELESS	25,000
WESLEY HOUSE COMMUNITY CENTER 923 DAMERON AVENUE KNOXVILLE,TN 37921	NONE	PUBLIC CHARITY	PROVIDING SUPPORT FOR THE LOCAL COMMUNITY	14,000
THRIVE LONSDALE 1317 CONNECTICUT KNOXVILLE,TN 37921	NONE	PUBLIC CHARITY	CHRISTIAN AFTER SCHOOL MENTORING PROGRAM	7,500
CHILDREN'S CENTER OF THE CUMBERLANDS 22510 ALBERTA ST ONEIDA,TN 37841	NONE	PUBLIC CHARITY	CHILD ABUSE FACILITY	2,500
COMMUNITY SCHOOL OF THE ARTS 620 STATE ST KNOXVILLE,TN 37902	NONE	PUBLIC CHARITY	PROVIDES QUALITY INSTRUCTION IN ALL THE ARTS TO CHILDREN WHO CAN NOT AFFORD IT	5,000
EAST TENNESSEE CHILDREN'S HOSPITAL 2018 WEST CLINCH AVE KNOXVILLE,TN 37916	NONE	PUBLIC CHARITY	HOSPITAL DEDICATED TO CHILDREN'S HEALTH	15,000
Total				200,000

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491132034635

OMB No 1545-0047

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

GENE & FLORENCE MO	NDAY FOUNDATION INC	
Organization type (she	alk ana)	62-1518306
Organization type (che	ck 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 fou	undation
	√ 527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundary	tion
	501(c)(3) taxable private foundation	
	n is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule a	and a Special Rule See instructions
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributor om any one contributor. Complete Parts I and II. See instructions for determin	
Special Rules		
under sections 5 received from an	on described in section $501(c)(3)$ filing Form 990 or 990-EZ that met the $33^1 B$ 09(a)(1) and $170(b)(1)(A)(vi)$, that checked Schedule A (Form 990 or 990-EZ y one contributor, during the year, total contributions of the greater of (1) \$5, or (ii) Form 990-EZ, line 1 Complete Parts I and II	Z), Part II, line 13, 16a, or 16b, and that
during the year, t	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that total contributions of more than \$1,000 exclusively for religious, charitable, so n of cruelty to children or animals. Complete Parts I, II, and III	· ·
during the year, of this box is check purpose Do not of	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that contributions exclusively for religious, charitable, etc., purposes, but no such ed, enter here the total contributions that were received during the year for a complete any of the parts unless the General Rule applies to this organization, etc., contributions totaling \$5,000 or more during the year	n contributions totaled more than \$1,000 lf an exclusively religious, charitable, etc, on because it received nonexclusively

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)

Name of organization
GENE & FLORENCE MONDAY FOUNDATION INC

Employer identification number 62-1518306

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	GFM INC PO BOX 1 KNOXVILLE, TN 37901	\$12,287	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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization
GENE & FLORENCE MONDAY FOUNDATION INC
62-1518306

art II Nonca	Sh Property (see instructions) Use duplicate copies of Part II if additional space	ce is	
) No. rom 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 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 rt I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
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 Name of organization **Employer identification number** GENE & FLORENCE MONDAY FOUNDATION INC 62-1518306 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for 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 information once See instructions) Use duplicate copies of Part III if additional space is needed (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. (c) Use of gift from (b) Purpose 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

TY 2014 General Explanation Attachment

Name: GENE & FLORENCE MONDAY FOUNDATION INC

ldentifier	Return Reference	Explanation
	· '	THE INSTRUCTIONS FOR FORM 990-PF REQUIRE A SCHEDULE THAT LISTS EACH SECURITY HELD AT THE END OF THE YEAR, AND TO SHOW WHETHER THAT SECURITY IS REPORTED AT COST BASIS OR FMV ALL SECURITIES ARE HELD IN A BROKERAGE ACCOUNT THROUGHOUT THE YEAR AND ARE REPORTED AT FMV THIS SCHEDULE CAN BE PROVIDED TO THE IRS AT THEIR REQUEST



TY 2014 Investments Corporate Bonds Schedule

Name: GENE & FLORENCE MONDAY FOUNDATION INC

	Name of Bond	End of Year Book Value	End of Year Fair Market Value
HILLIA	RD LYONS - FIXED INCOME	677,210	677,210

TY 2014 Investments Corporate Stock Schedule

Name: GENE & FLORENCE MONDAY FOUNDATION INC

Name of Stock	End of Year Book Value	End of Year Fair Market Value
GFM, INC.	990,852	990,852
HILLIARD LYONS - MUTUAL FUNDS	3,371,548	3,371,548

TY 2014 Other Expenses Schedule

Name: GENE & FLORENCE MONDAY FOUNDATION INC

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ANNUAL REPORT FEE	20	0		0
ATTORNEY FEES	3,700	0		0
ACCOUNTING FEES	2,750	0		0

TY 2014 Other Increases Schedule

Name: GENE & FLORENCE MONDAY FOUNDATION INC

Description	Amount
UNREALIZED GAIN/LOSS ON INVESTMENTS	27,581

TY 2014 Taxes Schedule

Name: GENE & FLORENCE MONDAY FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX	5,079	0		0
FOREIGN TAX ON DIVIDENDS	650	0		0

TY 2014 TransfersFrmControlledEntities

Name: GENE & FLORENCE MONDAY FOUNDATION INC

Name	US / Foreign Address	EIN	Description	Amount
GFM INC	6440 PAPERMILL DRIVE KNOXVILLE, TN 37919	62-0352375	DIVIDENDS IN THE AMOUNT OF \$99,013 CASH DONATIONS IN THE AMOUNT OF \$12,287	111,300
Total				111,300