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## Form **990-PF**

EXTENDED TO AUGUST 17, 201
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.

	Depa	rtmer	nt of the Treasury	1			social security numbers or m 990-PF and its separate				Open to Public Inspection
	_		ndar year 2014 o		-		<u></u>	, and e		s.govnomissopi.	Open to Audit hispection
			f foundation			4=			<del></del>	A Employer identificati	on number
	$\overline{}$		MCLERO				address)		Room/suite	62-176330 B Telephone number	5
			9 SADDLI								-3694
			ntown, state or pro		intry, and ZI 37027	P or foreign p	ostal code			C If exemption application is	pending, check here
	H (	Checl	k all that apply:  k type of organiza ection 4947(a)(1) arket value of all Part II, col. (c),	nonexem assets at e line 16)	pt charitable end of year	ange 1 501(c)(3) ex trust	Initial return of a language Amended return Name change Rempt private foundation Other taxable private found ing method: Cash ther (specify) mn (d) must be on cash	ation X Acci		D 1. Foreign organizations check here and attach  E If private foundation sunder section 507(b)(  F If the foundation is in under section 507(b)(	tatus was terminated  1)(A), check here
		art I	Analysis of Re (The total of amore necessarily equal	venue an	d Expenses	I (d) may not	(a) Revenue and expenses per books	(b) Net in	vestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
		1	Contributions, g			·				N/A	, ,
		2	Check X interest on savings cash investments	the foundation	n is not required to						
		4	Dividends and i	nterest fro	m securities		30,329.	3	0,329.		STATEMENT: 1
		5a	Gross rents			-					いいのとおかせん
		Ь	Net rental income	or (loss)							1. 19 · 19 · 19 · 19 · 19 · 19 · 19 · 19
	e)	6a	Net gain or (loss) fr				54,413.			<del> </del> .	
	Revenue	b	assets on time oa .			<u>,365.</u>			4 41 2	ļ	The state of the s
	ě	7	Capital gain net inc	-	•	-			4,413.		
		l °	Net short-term		n .			<u> </u>			TO THE PROPERTY OF
		9	Income modific Gross sales less re	ations sturns	•	•					A TANK TO THE STATE OF THE STAT
		10a	and allowances Less Cost of good					<del> </del>		<del> </del>	1 337.34
		ı	Gross profit or	•			L				18 6 M. 28 4 15
		<sub>11</sub> "	Other income	(1033)	•	•	7505	IVED.			15 Ty 1000
ம		12	Total. Add lines	s 1 througi	 h 11		84,742		4.742.		10000000000000000000000000000000000000
2015		13	Compensation of c			etc	<b>13,890.</b>		₩695.		13,195.
(F)		14	Other employee	salaries a	nd wages		ISI JUN (	8 2015	12		
٨		15	Pension plans,	employee	benefits		(6)		1881		
	Ses	16a	Legal fees			-	000	-~1 LDT	\		
.Z.C.;	Administrative Expenses	b	Accounting fees	;	នុក្ខ	'МТ 2	9,588.		0.		9,588.
; }	Ä	C	Other profession	nal fees							
The work	e <u>≤</u> .	17	Interest		-		1 546				1 001
7	trat	18	Taxes		- •	тмт 3	1,546.		0.		1,081.
4.	 	19	Depreciation an	a aepietioi	n						
Š.	E	20 21	Occupancy Travel, conferen	 wee and r	mootinge			<del>                                     </del>			<del></del>
			Printing and pul		nccungs			<del></del>			
	and	23	Other expenses		ST	MT 4	13,163.		7,878.	· · · · ·	5,285.
	Operating	24	Total operating						, , , , , ,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Sers		expenses. Add				38,187.		8,573.	-	29,149.
	Ö	25	Contributions, g		_		106,665.				106,665.
		26	Total expenses								
			Add lines 24 an	d 25			144,852.		8,573.		135,814.
		27	Subtract line 26	from line	12:			ļ. <u> </u>			
			Excess of revenue				-60,110.		C 1.C.	ļ	
		b	Net investment					<del>                                     </del>	6,169.	N/A	
			Adjusted not in:	rome (if ne	enative enter d	1-1	i e	i		ı N/A	1

T	art	Balance Sheets   Attached schedules and amounts in the description	beginning or year	End of	year
뜨	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	8,497.	2,592.	2,592.
	2	Savings and temporary cash investments	35,147.	25,012.	25,012.
	3	Accounts receivable			
	ł	Less: allowance for doubtful accounts		* * * * * * * * * * * * * * * * * * * *	
	4	Pledges receivable ►			<del> </del>
		Less: allowance for doubtful accounts			
	5	Grants receivable		******	<del></del>
	6	Receivables due from officers, directors, trustees, and other	<del></del>		<u>-</u>
	۱ů	disqualified persons			
	,	i i i i i i i i i i i i i i i i i i i			
	7	Other notes and loans receivable			
	۱.	Less; allowance for doubtful accounts	<del></del>		
Assets	8	Inventories for sale or use			
SS	9	Prepaid expenses and deferred charges			
Q	.~~	Investments - U.S. and state government obligations			····
	b	Investments - corporate stock STMT 5	594,273.	541,745.	955,264.
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation			
	15	Other assets (describe ► )			1
	16	Total assets (to be completed by all filers - see the			
	l	instructions. Also, see page 1, item I)	637,917.	569,349.	982,868.
	17	Accounts payable and accrued expenses	153.	223.	
	18	Grants payable			· * * * * * * * * * * * * * * * * * * *
	19	Deferred revenue			11 S. 15 4 4 1 5 7 1
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons		-	,
Ħ	21	Mantanana and other nation assuble			
Ë		Other liabilities (describe )			
	~~	Other Habilities (describe >	<del></del>		,
	23	Total liabilities (add lines 17 through 22)	153.	223.	
	23	Foundations that follow SFAS 117, check here	133.	443.	
		· · · · —			
S	24	and complete lines 24 through 26 and lines 30 and 31.	627 764	500 100	
ည	ı	Unrestricted	637,764.	569,126.	
alar	25	Temporarily restricted			
Net Assets or Fund Balanc	26	Permanently restricted			
Ĕ		Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
S	27	Capital stock, trust principal, or current funds			
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
Ä	29	Retained earnings, accumulated income, endowment, or other funds			
Ret	30	Total net assets or fund balances	637,764.	569,126.	
	31	Total liabilities and net assets/fund balances	637,917.	569,349.	
Þ	art l	Analysis of Changes in Net Assets or Fund Bal	ances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 30	)		
	(mus	t agree with end-of-year figure reported on prior year's return)			637,764.
		amount from Part I, line 27a	• •	2	-60,110.
		increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3	- · · -	4	577,654.
		ases not included in line 2 (itemize) PRIOR PERIOD AD	JUSTMENT	5	8,528.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu		6	569,126.

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Form 990-PF (2014)

THE MCLEROY FOUNDATION

	MCLEROY FOUNDA		Incomo	ODD AMMAGI		-1763305 Page 3
	· · · · · · · · · · · · · · · · · · ·		income	SEE ATTACH		ATEMENT
	ibe the kind(s) of property sold ( rehouse; or common stock, 200			(b) How acquired P - Purchase D - Donation	(c) Date acq (mo., day,	quired (d) Date sold yr.) (mo., day, yr.)
1a			<del></del>	D - Donation		<del></del>
b						
C	·····	···	· · · · · · · · · · · · · · · · · · ·	<del></del>		
d	<del></del>	•				
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			or (loss) ) minus (g)
a						
b						
С						
d						
e 125,365.	<del></del>		70,95			54,413.
Complete only for assets showing	· · · · · · · · · · · · · · · · · · ·					(h) gain minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any	CO	Losses (fro	less than -0-) or om col. (h))
a						
b						
C						
d						F4 412
e						54,413.
2 Capital gain net income or (net cap	oital loss) $ \begin{cases} \text{ If gain, also e} \\ \text{ If (loss), enter} \end{cases} $	nter in Part I, line r -0- in Part I, line	7 7	} 2		54,413.
3 Net short-term capital gain or (los	s) as defined in sections 1222(5)	) and (6):				
If gain, also enter in Part I, line 8,	column (c).			<b>}</b>		*-
If (loss), enter -0- in Part I, line 8	-d Ct 4040(-) 4	Dadas a	Tour on Next	] 3		N/A
Part V Qualification Ur		<del></del>	•		ome	
(For optional use by domestic private	foundations subject to the section	on 4940(a) tax on	net investment ind	come.)		
If section 4940(d)(2) applies, leave th	s part blank.					
Was the foundation liable for the secti			•	100?		Yes X No
If "Yes," the foundation does not quali 1 Enter the appropriate amount in e				ntries.		
	(b)			(c)	<u> </u>	(d) Distribution ratio
(a) Base period years Calendar year (or tax year beginnin	Adimated analytica	distributions	Net value of no	ncharitable-use assets	(col	Distribution ratio I. (b) divided by col. (c))
2013	<del>9 1 1</del>	107,475.		964,737		.111403
2012		10,310.		913,646		.120736
2011		01,143.		925,263		.109313
2010		75,041.		879,046		.085366
2009		69,728.		750,245		.092940
2 Total of line 1, column (d)					2	.519758
3 Average distribution ratio for the 5	-year base period - divide the tot	tal on line 2 by 5,	or by the number	of years		
the foundation has been in existen	ce if less than 5 years				3	.103952
4 Enter the net value of noncharitable	e-use assets for 2014 from Part	X, line 5			4	991,537.
		,	•	•		
5 Multiply line 4 by line 3				•	5	103,072.
6 Enter 1% of net investment income	e (1% of Part I, line 27b)	•			6	762.
7 Add lines 5 and 6					7	103,834.
B Enter qualifying distributions from	Part XII, line 4				8	135,814.
If line 8 is equal to or greater than	ŕ	line 1h and como	lete that nart using	n a 1% tay rate		
See the Part VI instructions.	mio 7, viicon tiic voa III Fait VI, I	10, and comp	ioto triat part usilli	y u 1/0 tax 1 atc.		
423521 11-24-14		• • • • • • • • • • • • • • • • • • • •	· · · · · ·			Form 990-PF (2014)

	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4940	2-176			Page 4
_		s - see i	nstru	cuon	S)
18	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		<del> </del>		<u> </u>
		1			62.
	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).				
_	And the second s	2		<del></del>	0.
3		3			62.
4		4		<del></del>	0.
5	· · · · · · · · · · · · · · · · · · ·	5			62.
6	Credits/Payments:	ŀ			
	2014 estimated tax payments and 2013 overpayment credited to 2014				
	Exempt foreign organizations - tax withheld at source				
	Tax paid with application for extension of time to file (Form 8868)  6c 973.				
	Backup withholding erroneously withheld 6d				
_		7			<u>73.</u>
8		8			11.
9		9			
10		0			00.
	Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ 200 . Refunded ▶ 1  Int VII-A   Statements Regarding Activities	1			0.
			<del></del>	Vaa	No
11	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		4.	Yes	
	any political campaign?		1a	<b> </b>	X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?		1b	2000000	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published o	r			
_	distributed by the foundation in connection with the activities.		<b>36 16</b>	<b>CONTRACT</b>	X
	Did the foundation file Form 1120-POL for this year?		1c	202000000	A SANTESTAN
u	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation.   \$\( \bigcup_{\text{\colored}} \bigcup_{\col				
_		,	2000	S- 14	
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?		****		X
-	If "Yes," attach a detailed description of the activities.		2 2000		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			CO.	
Ü	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3	A STATE OF THE STA	X
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	•••	4a		<u>X</u>
	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		<del></del>
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	,	5	$\Box$	X
•	If "Yes," attach the statement required by General Instruction T.	•	XX 34		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or				
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law</li> </ul>	ı	7.3		
	remain in the governing instrument?		6	X	1-200-48
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	
	y value of a state in 100, complete that it, con (c), and that the		42 4	96.75°	12 No.
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			<b>1</b>	× (
	TN			3 200	, , ,
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)		1,00	**- **	,
	of each state as required by General Instruction G? If "No," attach explanation		8b	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 calendar	•			
	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV		9		<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		<u>x</u>

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	art VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	1 1		
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► SUZANNE CHRISTMAN Telephone no. ► (615)	498-	-69	<u>89</u>
	Located at ► 4115 LENORE LANE, SMYRNA, TN ZIP+4 ►3	<u>7167</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<b>&gt;</b>	· 🗀
	and enter the amount of tax-exempt interest received or accrued during the year		/A	0.
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,	.	Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the	1		
	foreign country			
Pa	art 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 1	1	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1 1	•	e '
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		4	age ,
	a disqualified person? Yes X No	1 1	2.72	1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1 1	<i>i</i> .	· .
	(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	1 1	3	\$7
	for the benefit or use of a disqualified person)?	r 15.	18 .	楼.
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	`,"		OF THE
	If the foundation agreed to make a grant to or to employ the official for a period after	3000	# 6.41 E.14	10 CA
	termination of government service, if terminating within 90 days.)	× 7 5		20
b	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1	議案	<b>10</b>
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		X
	Organizations relying on a current notice regarding disaster assistance check here	3,4		<b>数</b> 2.
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	7, 1 "	3-45	ACT OF
	before the first day of the tax year beginning in 2014?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	, S	Ser.	18 P
	defined in section 4942(j)(3) or 4942(j)(5)):			
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	25	3.38	
	before 2014? Yes X No	300	***	<b>*</b>
	If "Yes," list the years >,,,,,,	3 1	Salar Care	100
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect		100	122.4
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach		Fig. 4.	J. Steren
	statement - see instructions.) N/A	2b		<u> </u>
•	the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	,	类 :	1-11
	<b>&gt;</b>			
38	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
t	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,			1
	Form 4720, to determine if the foundation had excess business holdings in 2014.)	3b		v
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
1	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	4b	-	х
	ran nor neen reinnven trott jennatiiv neeme me mist nav ni die iat veat neominio in 70.147	1 40 1		. 41

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Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be R	equired <sub>(contin</sub>	ued)	
<ul> <li>5a During the year did the foundation pay or incur any amount to: <ol> <li>Carry on propaganda, or otherwise attempt to influence legislation (section</li> <li>fifluence the outcome of any specific public election (see section 4955); or any voter registration drive?</li> <li>Provide a grant to an individual for travel, study, or other similar purposes'</li> <li>Provide a grant to an organization other than a charitable, etc., organization 4945(d)(4)(A)? (see instructions)</li> <li>Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?</li> <li>If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und</li> </ol> </li> </ul>	r to carry on, directly or indirectly or ind	Ye Ye Ye Or Ye	es X No	
section 53.4945 or in a current notice regarding disaster assistance (see instru		ii negulations	N/A	5b
Organizations relying on a current notice regarding disaster assistance check hi			<b>▶</b> □	
<ul> <li>c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr expenditure responsibility for the grant?</li> <li>If "Yes," attach the statement required by Regulations section 53.4945</li> <li>6a Did the foundation, during the year, receive any funds, directly or indirectly, to proceed the section of the foundation.</li> </ul>	om the tax because it maıntaı N -5(d).	I/A Ye	es No	Sort A
a personal benefit contract?		Ye	es 🗶 No	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax s  b If "Yes," did the foundation receive any proceeds or have any net income attribution.	table to the transaction?		es X No 🗵	7b
Part VIII Information About Officers, Directors, Truster Paid Employees, and Contractors	es, Foundation Mar	nagers, Highly		
List all officers, directors, trustees, foundation managers and their controls.	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
SEE STATEMENT 6		13,890.	3,841.	0.
2 Compensation of five highest-paid employees (other than those incl	uded on line 1). If none, o	enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE			•	
Table pumber of other ampleuses and ourse \$50,000	<u></u>			<u> </u>
Total number of other employees paid over \$50,000		-	▶ .	0

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Part VIII Information About Officers, Directors, Trustees, Foundati Paid Employees, and Contractors (continued)	on Managers, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter "	'NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Corr	pensation
NONE	(5) 1390 01 001 1100	(0, 00	ponociion
	†		
	<del></del>		
	1		
***************************************			
	1		
	7		
	]		
Total number of others receiving over \$50,000 for professional services		<b>•</b>	0
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic	al information such as the	Expenses	
number of organizations and other beneficiaries served, conferences convened, research papers produc	ed, etc.	LAPERISES	, 
1 <u>N/A</u>			
2			
3			
3			
***************************************			
4		<del></del>	
Part IX-B   Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year on lin	ies 1 and 2.	Amount	-
1 <u>N/A</u>			
2			
All other program related investments Conventions			
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 for	undations, s	see instructions.)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	T	
a Average monthly fair market value of securities	1a	972,210.
b Average of monthly cash balances	1b	34,427.
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	1,006,637.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation) 1e 1e 0	.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	1,006,637.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	15,100.
Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	991,537.
6 Minimum investment return. Enter 5% of line 5	6	49,577.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations of foreign organizations check here and do not complete this part.)	and certain	
	11	49,577.
		45,5111
2a Tax on investment income for 2014 from Part VI, line 5	H	
c Add lines 2a and 2b	2c	762.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	48,815.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	48,815.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	48,815.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	<del>                                      </del>	135,814.
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	133,814.
b Program-related investments - total from Part IX-B	1b 2	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	-	
3 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required)	3a	
	3b	
b Cash distribution test (attach the required schedule)	4	135,814.
<ul> <li>Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4</li> <li>Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment</li> </ul>	-	133,014.
income Fater 19/ of Port Line 97h	5	762.
	6	135,052.
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		<del></del>
4940(e) reduction of tax in those years.	чианноэ Ю	IIIO SCOUVII

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Part XIII Undistributed Income (see instructions)

	•	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1	Distributable amount for 2014 from Part XI,				48,815.
_	line 7				40,013.
_	Undistributed income, if any, as of the end of 2014			0.	
	Enter amount for 2013 only				
	Total for prior years:		0.		
•	Excess distributions carryover, if any, to 2014:		0.		
	• -				
	32,600.		•		
	From 2010 31,511.				
	From 2011 55, 260.				
	1 From 2012 66,760.				
	From 2013 60,168.	246 200			
	Total of lines 3a through e	246,299.			
4	Qualifying distributions for 2014 from				
	Part XII, line 4: ►\$ 135,814.		,		
ä	Applied to 2013, but not more than line 2a			0.	
t	Applied to undistributed income of prior				
	years (Election required - see instructions)		0.		, , , , , , , , , , , , , , , , , , ,
(	Treated as distributions out of corpus	0.			
	(Election required - see instructions)	0.	<del>'</del>		48,815.
	Applied to 2014 distributable amount	86,999.	* ,		40,013.
	Remaining amount distributed out of corpus		7 · · · · · · · · · · · · · · · · · · ·		O
5	Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.	2		
6	Enter the net total of each column as indicated below:		A CANADA CONTRACTOR		
â	Corpus Add lines 3f, 4c, and 4e. Subtract line 5	333,298.	<b>A</b>	· · · · · · · · · · · · · · · · · · ·	
t	Prior years' undistributed income. Subtract		_	,	
	line 4b from line 2b	· 人名英格兰人名	0.	•	
(	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		0.		
	assessed	3		· · · · · · · · · · · · · · · · · ·	2 200 1 200 200 CONTRACTOR
(	Subtract line 6c from line 6b. Taxable		0.	,	
	amount - see instructions	· 子· · · · · · · · · · · · · · · · · ·		·	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
•	Undistributed income for 2013. Subtract line	· · · · · · · · · · · · · · · · · · ·	بر جوا	,	and the state of t
	4a from line 2a. Taxable amount - see instr.	you the second of the second	16/-	0.	5 . " "TV \$ . "
f	Undistributed income for 2014. Subtract				
	lines 4d and 5 from line 1. This amount must				0.
	be distributed in 2015				· · · · · · · · · · · · · · · · · · ·
7	Amounts treated as distributions out of			1	
	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	22 522			
	not applied on line 5 or line 7	32,600.			
9	Excess distributions carryover to 2015.	0.00		•	
	Subtract lines 7 and 8 from line 6a	300,698.			
0	Analysis of line 9:			1	
ä	Excess from 2010 31,511.				
ı	Excess from 2011 55, 260.				
•	Excess from 2012 66, 760.				
	Excess from 2013 60, 168.				
	Excess from 2014 86,999.			<u> </u>	5 000 DF (0) (1)

Form 990-PF (2014) THE MCL	EROY FOUNDA	TION		62-17	63305 Page 10
Part XIV Private Operating F	oundations (see in:	structions and Part VII-	A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter that	it is a private operating			<del></del>
foundation, and the ruling is effective fo	r 2014, enter the date of t	he ruling	▶		
b Check box to indicate whether the found	dation is a private operatir	ig foundation described in	n section	4942(j)(3) or 49	942(1)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	<del> </del>	
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>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not				<del></del>	-
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					
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			the foundation	had \$5,000 or mor	e in assets
at any time during the	he year-see instri	uctions.)			
1 Information Regarding Foundatio	n Managers:				
a List any managers of the foundation who			butions received by the	foundation before the close	e of any tax
year (but only if they have contributed n	nore than \$5,000). (See se	ection 507(d)(2).)			
NONE					
b List any managers of the foundation who			or an equally large porti	on of the ownership of a pa	rtnership or
other entity) of which the foundation has	s a 10% or greater interes	t.			
NONE					
2 Information Regarding Contributi					
Check here 🕨 🔙 If the foundation o					
the foundation makes gifts, grants, etc.	(see instructions) to indivi	iduals or organizations un	ider other conditions, c	omplete items 2a, b, c, and	d
a The name, address, and telephone number	per or e-mail address of th	ne person to whom applic	ations should be addre	ssed:	
SEE STATEMENT 7					
b The form in which applications should b	e submitted and informati	ion and materials they sho	ould include:		
• Any guhangana daadhaasa			<del></del> _		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographica	l areas, charitable fields, l	kinds of institutions, or	other factors:	

2 Country of Country in Contraction				
3 Grants and Contributions Paid During the Y		Payment	-r	<del></del> _
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
a Paid during the year	or substantial contributor	recipient		
AGAPE	NONE	PUBLIC	FOSTER TO ADOPT	
4554 TROUSDALE DRIVE			ASSISTANCE; COUNSELING	
NASHVILLE, TN 37204		<u> </u>		10,000
FAMILY & CHILDREN'S SERVICES	NONE	PUBLIC	CONNECTING KIDS	
201 23RD AVE. NORTH	TONE .	[ SBBIC	PROGRAM; ADOPTION	
NASHVILLE, TN 37203			COUNSELING; TRAUMA	
			ASSESSMENTS	10,000
FIRST STEPS	NONE	PUBLIC	CLASSROOM	
1900 GRAYBAR LANE		İ	INSTRUCTIONAL	
NASHVILLE, TN 37215			MATERIALS FOR SPECIAL	5 040
			NEEDS CHILDREN	5,040
MONROE HARDING, INC/HS GRAD INCENTIVE	NONE	PUBLIC	GED/HIGH SCHOOL	
1120 GLENDALE LANE			DIPLOMA INCENTIVE	
NASHVILLE, TN 37204			GRANT FOR 30 YOUTHS	19,500.
MONROE HARDING/RSI FOSTER CARE	NONE	PUBLIC	FACILITATE ADOPTIONS	
1120 GLENDALE LANE			AND SUPPORT FOSTER	
NASHVILLE, TN 37204			CARE PROGRAMS	30,000.
	TINUATION SHEE	Ţ(S)	► 3a	106,665.
b Approved for future payment				
NONE				
			1	
Total	<u> </u>		<b>▶</b> 3b	0.
10(0)	·			<u> </u>

### Form 990-PF (2014)

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

	Uprolated	business income	Fuelus	444	
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	ded by section 512, 513, or 514  (d)  Amount	(e) Related or exempt
1 Program service revenue:	code		code	Alliount	function income
a					<del></del>
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dundanda and interest from ecounities			14	30,329.	
5 Net rental income or (loss) from real estate:			+ = 1	30,3231	<del></del>
0-64 (	ļ		++		
a Debt-financed property	<del></del>	<del></del>	+ -		
b Not debt-financed property	<del>  -</del>		1 1		···
6 Net rental income or (loss) from personal			1		
property			1 1		
7 Other investment income			1	_	
8 Gain or (loss) from sales of assets other			ا ۽ ا	- 4 44 -	
than inventory			18	54,413.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			1 1		
11 Other revenue:					
a					<del></del>
b					
C					
d					
		-			
e					
		0.		84,742.	0.
e					84,742.
e  12 Subtotal. Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)				84,742.  13	
e				13	84,742.
e  12 Subtotal. Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)				13	84,742.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incompared to the substitution of t	o the Accom	plishment of Ex	empt l	13 Purposes	84,742.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities to	o the Accom	plishment of Ex	empt l	13 Purposes	84,742.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incompared to the substitution of t	o the Accom	plishment of Ex	empt l	13 Purposes	84,742.
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Part XVII	Information Re Exempt Organ		sfers To a	nd Transactions ar	nd Relationshi	ips With Noncharit	table		
1 Did the ora	_ <del></del>		of the following	g with any other organizatio	n described in section	on 501(c) of		Yes	No
•	•			7, relating to political organi		11 30 1(c) 01			
,	rom the reporting founda				Editions .				ı
(1) Cash	tom mo reporting reamen		oro oxompr or g	u			1a(1)		
(2) Other	assets						1a(2)	$\Box$	X
b Other trans									
_	of assets to a noncharital	ble exempt organizat	tion				1b(1)		X
• •	ases of assets from a no						1b(2)		X
• •	of facilities, equipment,						1b(3)		Х
• •	ursement arrangements						1b(4)		X
• •	or loan guarantees						1b(5)		X
	mance of services or me	embership or fundrais	sing solicitation	าร			1b(6)		X
c Sharing of	facilities, equipment, ma	ailing lists, other asse	ets, or paid emi	ployees			1c		X
d If the answ	er to any of the above is	"Yes," complete the	following sche	dule. Column (b) should alv	vays show the fair m	arket value of the goods, o	ther ass	ets,	
or services	given by the reporting f	oundation. If the four	ndation receive	d less than fair market value	e in any transaction	or sharing arrangement, sh	ow in		
column (d)	the value of the goods,	other assets, or serv	ices received.		- 1				
(a) Line no	(b) Amount involved	(c) Name of		exempt organization	(d) Description	of transfers, transactions, and st	naring arra	ingemen	ts
			N/A						
					-				
					<del>_</del>	<del></del>			
	<del></del>								
		<del> </del>							
		<del>                                     </del>	···		-				
	<del></del>				·				
					<del></del> -				
-		-			-				
<del></del>		<del></del>							
					<u> </u>				
2a le the four	udation directly or indirec	the affiliated with or	related to one	or more tax-exempt organi	zatione described				
	501(c) of the Code (othe	•	-	· -	zations described	Г	Yes	X	No
	emplete the following sch		)(0)) or iii 3661	1011 321 :		_			
<u> </u>	(a) Name of or			(b) Type of organization		(c) Description of relationsh	nip		
	N/A	<u></u>				· · · · · · · · · · · · · · · · · · ·			
		· · · · · · · · · · · · · · · · · · ·							
-	·			-					
				accompanying schedules and st			y the IRS o	liscuss t	his
Sign   🗼 /	fief, it is true, correct, and cor	mpleten Declaration of pro	eparer (other than	taxpayer) is based on all informa	tion of which preparer ha	s any knowledge retu	im with the	e prepare	er
Here	Shull Mic	KINDIN		1/0/3/15	PRESID		X Yes		No
Sign	ature of officer or truste	e		Date	Title				
	Print/Type preparer's n	ame	Preparer's s	ignature	Date	Check if PTIN			
			11	-11 /	-//	self- employed			
Paid	JASON S. H		yasm >	Hoard CPA	5/13/15		0532		
Preparer	Firm's name ► FRA	ASIER, DEA	40 % HO	WARD, PLLC	/ /	Firm's EIN ► 62-10	735	78	
Use Only		***							
	Firm's address ► 33								
	l NA	ASHVILLE.	TN 372	03		Phone no. 615-38	33-6	592	

Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired (c) Date acquired (d) Date sold (a) List and describe the kind(s) of property sold, e.g., real estate, (mo., day, yr.) (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co. D - Donation ARCHER-DANIELS-MIDLAND CO P 04/29/1012/02/14 1a 100 P 02/26/0412/02/14 ь 250 AT&T P 09/11/0701/21/14 c 200 BRISTOL-MYERS SOUIBB d 200 P 09/11/0704/07/14 BRISTOL-MYERS SQUIBB P 02/12/0201/21/14 e 100 DISNEY WALT HLDG CO P 02/12/0204/07/14 f 100 DISNEY WALT HLDG CO g 100 P 02/28/0301/21/14 MERCK & CO 02/28/0312/02/14 h 100 MERCK & CO P ROWAN COMPANIES INC P 11/16/04|07/01/14 800 P 01/24/0304/07/14 SPECTRA ENERGY CORP 200 03/10/0305/20/14 P 300 SPECTRA ENERGY CORP P 03/10/0307/01/14 1 200 SPECTRA ENERGY CORP m 540 TECO ENERGY INC P 05/30/0206/09/14 n 60 TECO ENERGY INC  $\overline{\mathtt{P}}$ 05/30/0206/09/14 (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (e) plus (f) minus (g) (or allowable) plus expense of sale 2,469. 5,287. 2,818. а 6,012. 2,677. 8,689. b 5.310. 10,941. 5,631. C 5,631. 4,430. 10,061. d 7,368. 2,316. 5,052. е 2,316. 5,563. 7,879. 1,826. 5,199. 3,373. g 6,034. 1,826. 4,208. h 18,997. 25,611. 6,614. 7,495. 2,870. 4,625. 3,177. 8,689. 11,866. k 2,118. 6,385. 8,503. 13,873. -4,484. 9,389. m 1,541. -498. 1,043. n 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) but not less than "-0-") (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (i), if any 2,469. a 2,67<del>7.</del> þ 5,310. C 4,430. d 5,052. е 5,563. f 3,373. g 4,208. h 6,614. 4,625. 8,689. k 6,385. -4,484. m -498. n { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } 54,413. 2 Capital gain net income or (net capital loss) 2 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). N/A If (loss), enter \*-0-\* in Part I, line 8

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient NONE PUBLIC NEW TRANSITIONS, INC ASSIST WITH EXPENSES 698 CHEYENNE BLVD. RELATED TO SUPPORT FOR MADISON, TN 37115 YOUTH EXITING FOSTER CARE 4,800. OASIS CENTER/TN YOUTH ADVISORY NONE PUBLIC EMERGENCY SHELTER ADN TRANSITIONAL LIVING COUNCIL 1704 CHARLOTTE PIKE, STE. 200 PROGRAMS 15,000. NASHVILLE, TN 37203 NONE PUBLIC YOUTH TRANSITIONS, INC EMPLOYMENT 9919 KINGSTON PIKE OPPORTUNITIES FOR KNOXVILLE, TN 37922 DISABLE YOUTH 7,325. YOUTH ENCOURAGEMENT SERVICES NONE PUBLIC AT-RISK YOUTH 521 MCIVER STREET ENRICHMENT SERVICE NASHVILLE, TN 37211 2,500. YOUTH VILLAGES NONE PUBLIC TRANSITIONAL LIVING 3310 PERIMETER HILL DRIVE PROGRAM NASHVILLE, TN 37211 2,500. 32,125. Total from continuation sheets

#### 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 Reve	nue Service	► Information about Form 886	8 and its	instructions is at www.irs.gov/form	n8868 ·		
• If you a	re filing for an Aut	omatic 3-Month Extension, complet	e only Pa	rt I and check this box		<b>&gt;</b>	· [X]
-	_	litional (Not Automatic) 3-Month Ext					
-	mplete Part II unle:			tic 3-month extension on a previous			
		ou can electronically file Form 8868 if y		•	-		oration
		or an additional (not automatic) 3-mor					
-		ns listed in Part I or Part II with the exc					
	-	which must be sent to the IRS in paper					
		lick on e-file for Charities & Nonprofits		oco moneciación. Los moso concile o			,
Part I		3-Month Extension of Time		submit original (no copies ne	eded).		
A corpora	tion required to file	Form 990-T and requesting an autom	natic 6-mo	nth extension - check this box and	complete		
Part I only	<b>,</b>					<b>&gt;</b>	· 🔲
All other c	corporations (includ	ling 1120-C filers), partnerships, REMI	Cs, and tro	usts must use Form 7004 to request	an extens	ion of time	
to file inco	me tax returns.				Enter file	er's identifying nun	ıber
Type or	Name of exemp	t organization or other filer, see instruc	ctions.		Employe	r identification numb	oer (EIN) or
print	THE MOTE	ROY FOUNDATION				62-176330	+5
File by the		and room or suite no. If a P.O. box, se	o inetruct	ions	Social se	ecurity number (SSN	
due date for filing your		DLEWOOD LANE	e mstruct	ions.	Social Se	curity number (3314	,
return. See instructions.		st office, state, and ZIP code. For a fo	reign addi	ress, see instructions.	L		
	BRENTWOO		<b>3</b>				
Enter the I	Return code for the	e return that this application is for (file	a separat	e application for each return)	••••	•••••	0 4
Application			Return	Application			Return
ls For			Code	Is For			Code
	or Form 990-EZ		01	Form 990-T (corporation)			07
Form 990-	·BL		02	Form 1041-A			08
Form 4720	0 (individual)		03	Form 4720 (other than individual)			09
Form 990-			04	Form 5227			10
Form 990-	T (sec. 401(a) or 4	08(a) trust)	05	Form 6069			11
	T (trust other than		06	Form 8870			12
		SUZANNE CHRISTM	IAN				
• The bo	oks are in the care	of > 4115 LENORE LAN	IB - S	MYRNA, TN 37167			
Telepho	one No. ▶ (61	5) 498-6989	-	Fax No. ▶			
		ot have an office or place of business	in the Uni	ted States, check this box			
	•	m, enter the organization's four digit G				r the whole group, c	heck this
box ▶ [		of the group, check this box	=				
		3-month (6 months for a corporation		<del> </del>			
	AUGUST 15			tion return for the organization name		The extension	
	r the organization's	<del></del>		•			
	X calendar year						
▶Ī	tax year begin	<del></del>	, an	d ending		•	
	_ , , ,						
2 If the	<b>¬</b>	in line 1 is for less than 12 months, ch	eck reaso	on: Initial return	Final retur	n	
	Change in accou		_				
	• •	Forms 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any			022
	refundable credits.		<del> </del>		3a	\$	973.
b If thi	is application is for	Forms 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and			_
		ts made. Include any prior year overpa			3b	\$	0.
c Bala	ance due. Subtrac	t line 3b from line 3a. Include your pay	ment with	n this form, if required,			
by u	sing EFTPS (Electi	ronic Federal Tax Payment System). S	ee instruc	tions.	3c	\$	<u>973.</u>
Caution. I	f you are going to	make an electronic funds withdrawal (	direct deb	oit) with this Form 8868, see Form 84	153-EO an	d Form 8879-EO for	payment
instruction	ıs.						

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

Form 8868 (Rev. 1-2014)

FORM 990-PF	DIVIDEND	S AND INTER	EST FROM S	ECURITIES S	TATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVEN		
SCHWAB ONE	30,329	•	0. 30,	329. 30,329.	
TO PART I, LINE 4	30,329	•	30,	329. 30,329.	
FORM 990-PF		ACCOUNTI	NG FEES	S	TATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOL		(D) CHARITABLE PURPOSES
ACCOUNTING FEES		9,588.		0.	9,588.
TO FORM 990-PF, PG	l, LN 16B	9,588.		0.	9,588.
FORM 990-PF		TAX	ES	S	TATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		(D) CHARITABLE PURPOSES
INCOME TAX PAYROLL TAXES		465. 1,081.		0.	0.
TO FORM 990-PF, PG	L, LN 18	1,546.		0.	1,081.

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FORM 990-PF	OTHER E	XPENSES	STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INVESTMENT ACCOUNT ADMIN					
FEES	7,878.	7,878.		0.	
MISCELLANEOUS	968.	0.		968.	
HOSPITALITY	263.	0.		263.	
INSURANCE - HEALTH & OTHER	3,838.	0.		3,838.	
ADMINISTRATION EXPENSES	116.	0.		116.	
CONTRIBUTIONS	100.	0.		100.	
TO FORM 990-PF, PG 1, LN 23	13,163.	7,878.		5,285.	

FORM 990-PF CORPORATE STOC	CK	STATEMENT 5
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
3M COMPANY	21,119.	57,512.
ABBOTT LABORATORIES	9,715.	18,008.
ALCOA INC	44,972.	58,423.
AT&T	34,724.	47,026.
BRISTOL-MYERS SQUIBB	29,254.	70,836.
DISNEY WALT HLDG CO	16,392.	65,933.
DUKE POWER COMPANY	20,669.	62,655.
EMERSON ELECTRIC COMPANY	36,342.	61,730.
GENERAL ELECTRIC CO.	50,662.	37,905.
MERCK & CO	16,906.	54,121.
PFIZER CORP	41,984.	46,725.
ROWAN COMPANIES INC	0.	0.
SPECTRA ENERGY CORP	23,077.	54,450.
TECO ENERGY INC	38,505.	57,372.
TUPPERWARE BRANDS CORP	13,648.	44,100.
VERIZON COMMUNICATIONS	29,324.	46,780.
ARCHER-DANIELS-MIDLAND	35,832.	67,600.
JOHNSON & JOHNSON	11,792.	20,914.
UNITED TECHNOLOGIES CORP	29,340.	46,000.
ABBVIE INC	10,535.	26,176.
TRANSOCEAN INC	26,953.	10,998.
TOTAL TO FORM 990-PF, PART II, LINE 10B	541,745.	955,264.

	IST OF OFFICERS, DAND FOUNDATION MANA		STAT	емент б
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
PHYLLIS MCLEROY BRENTWOOD, TN 37027	PRESIDENT 6.00	13,890.	3,841.	0.
AMY WELLS CAMPBELL BRENTWOOD, TN 37027	TREASURER 1.00	0.	0.	0.
VANAIL GLIMPS BRENTWOOD, TN 37027	BOARD MEMBER 1.00	0.	0.	0.
WILLIE MCDONALD NASHVILLE, TN 37214	BOARD MEMBER 1.00	0.	0.	0.
HARRIET WHITE BRENTWOOD, TN 37027	BOARD MEMBER 1.00	0.	0.	0.
TRENT GREEN BRENTWOOD, TN 37027	BOARD MEMBER 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	2 6, PART VIII	13,890.	3,841.	0.

FORM 990-PF

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

STATEMENT 7

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

PHYLLIS MCLEROY C/O THE MCLEROY FOUNDATION 5549 SADDLEWOOD LANE BRENTWOOD, TN 37027

TELEPHONE NUMBER

615-889-3694

EMAIL ADDRESS

PMCLEROY@COMCAST.NET

FORM AND CONTENT OF APPLICATIONS

A WRITTEN PROPOSAL MUST BE SUBMITTED ELECTRONICALLY TO PHYLLIS MCLEROY AT PMCLEROY@COMCAST.NET. ANY ORGANIZATION REQUESTING FUNDS MUST PROVIDE EVIDENCE OF A 501(C)(3) STATUS AND A COPY OF THEIR IRS DETERMINATION IN ADDITION, THEY MUST SUBMIT A BUDGET, TIMELINES AND DESCRIPTION THE FOUNDATION WILL NOT PROVIDE GRANTS FOR CAPITAL OF THE PROJECT. EXPENDITURES OR OPERATING EXPENSES.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE PROGRAM MUST BE IN TENNESSEE. THE MCLEROY FOUNDATION ONLY PROVIDES GRANTS TO THOSE CHARITABLE ORGANIZATIONS THAT SERVE YOUTH IN FOSTER CARE; YOUTH WHO HAVE AGED OUT OR IN THE PROCESS OF AGING OUT OF FOSTER CARE; OR YOUTH WHO MAY BE AT RISK FOR ENTERING THE FOSTER CARE SYSTEM. THESE ORGANIZATIONS ARE NOT NECESSARILY PRE-SELECTED, BUT THERE ARE A LIMITED NUMBER OF THEM. WE HAVE INFORMATION PACKETS THAT ARE PROVIDED TO ANY INTERESTED AGENCIES.