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# Form, 990-PF

SCALLETT MAY 2

#### **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.

2014

Department of the Treasury Internal Revenue Service Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. For calendar year 2014 or tax year beginning and ending A Employer identification number Name of foundation THE JOHN AND HEIDI HASSENFELD 62-1768433 FAMILY FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 5009 HILL PLACE DRIVE (615)352 - 3299City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here NASHVILLE, TN 37205 G Check all that apply Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here Fair market value of all assets at end of year | J | Accounting method X Cash Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 194,600. (Part I, column (d) must be on cash basis.) ▶\$ Analysis of Revenue and Expenses (d) Disbursements for chantable purpose Part I (c) Adjusted net (b) Net investment (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income ıncome (cash basis only) 233,482 N/A Contributions, gifts, grants, etc., received if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 1 STATEMENT Dividends and interest from securities 5a Gross rents Net rental income or (loss) 62 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 61,034. 52,931 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain  $M\Delta Y$ Income modifications Gross sales less returns and allowances OGDEN. b Less Cost of goods sold c Gross profit or (loss) 11 Other income 233,483. 52,932 Total, Add lines 1 through 11 0. Compensation of officers, directors, trustees, etc. Other employee salaries and wages 15 Pension plans, employee benefits Operating and Administrative Expenses 16a Legal fees O. STMT 2 993. 993 **b** Accounting fees c Other professional fees 17 Interest STMT 3 147 147 0. 18 Taxes Depreciation and depletion 20 Occupancy Travel, conferences, and meetings 22 Printing and publications Other expenses 24 Total operating and administrative 1,140 1,140 expenses. Add lines 13 through 23 49,788 49,788. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 50,928 1,140 49,788. Add lines 24 and 25 27 Subtract line 26 from line 12. 182,555 2 Excess of revenue over expenses and disbursements 51,792 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

3501 -24-14 LHA For Paperwork Reduction Act Notice, see instructions.

FAMILY FOUNDATION 62-1768433 Form 990-PF (2014) Page 2 Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Beginning of year End of year (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash - non-interest-bearing 11,560. 21,667. 21,667. 2 Savings and temporary cash investments 3 Accounts receivable Less allowance for doubtful accounts 4 Pledges receivable ► Less, allowance for doubtful accounts Grants receivable Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations STMT 5 20,578. 172,933. b Investments - corporate stock 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 ▶ 16 Total assets (to be completed by all filers - see the 11,560. 42,245. 194,600. instructions Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable 22 Other liabilities (describe 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. **Net Assets or Fund Balances** 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 0 27 Capital stock, trust principal, or current funds Ō. 0. 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 11,560. 42,245. 11,560. 30 Total net assets or fund balances 11,560 31 Total liabilities and net assets/fund balances 42,245 Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 11,560. 2 Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 4 SEE STATEMENT Decreases not included in line 2 (itemize) 151,870. 42,245. Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 Form **990-PF** (2014)

423311 11-24-14

		sses for Tax on In	vestment	Income				2 170	0 1 3 3 1 agc 0
<del></del>		nd(s) of property sold (e g		IIIOOIIIC	(b) I	How acquired	(c) Date a	acquired	(d) Date sold
2-story brick w	arehouse, d	or common stock, 200 shs	MLC Co)	_	b	- Purchase - Donation	` (mo , d	ay, yr)	(mo, day, yr)
1a 2,676 SHARES V	VALMAF	T DE MEXICO	SA SPO	ON ADR		D	10/3	1/91	10/31/14
<u>b</u>									
C					┢				
<u>d</u>					$\vdash$	-			
<u>.</u>	(6) [	epreciation allowed	(a) Cos	t or other basis	_	<u>l_</u>	(h) G:	ain or (loss	\ \
(e) Gross sales price	""	(or allowable)		kpense of sale				s (f) minus (	
a 61,034				8,10	3.				52,931.
b									
C									
<u> </u>									
<u>e</u>				40/04/00					
Complete only for assets show			T					ol (h) gain not less thai	
(i) F M V. as of 12/31/69	,	j) Adjusted basis as of 12/31/69		cess of col (ı) col (ı), ıf any				(from col (	
a	<u> </u>			(,,, ,					52,931.
b	1								
C	-								
d									
е	]								_
		∫ If gain, also enter	ın Part I, line î	7	Ĵ				F2 021
2 Capital gain net income or (net o	capital loss)	f (loss), enter -0-	- in Part I, line	7	J	2			52,931.
3 Net short-term capital gain or (I			ıd (6)		)				
If gain, also enter in Part I, line 8 If (loss), enter -0- in Part I, line		:)				2		N/A	
Part V Qualification	Under S	ection 4940(e) for	Reduced	Tax on Net	Inv	estment Inc	ome		·
(For optional use by domestic priva									
		•	, ,			·			
If section 4940(d)(2) applies, leave	tilis part bia	IIIK							
Was the foundation liable for the se					nod?				Yes X No
If "Yes," the foundation does not qualified the appropriate amount in					ntro	<u> </u>			
(a)	reacti colui		istructions bei	ore making any e	(c)		<del></del> -		(d)
Base periód years Calendar year (or tax year begini	nına in)	(b) Adjusted qualifying dis	tributions	Net value of no	ncha	ritable-use assets			oùtion ratio vided by col. (c))
2013	gj	3	4,570.	<del></del>		7,560		. , , ,	4.572751
2012		3	5,845.			7,700			4.655195
2011			0.			914			.000000
2010			6,695.			39,022			1.196633
2009		6	4,505.			75 <b>,</b> 984	•	1	.848929
									11.273508
<ul><li>2 Total of line 1, column (d)</li><li>3 Average distribution ratio for th</li></ul>	o E-voor had	 oo nogod - duido tho total (	on line 2 by 5	 or by the number	r of vo	276	2		11.2/3300
the foundation has been in exist			un nine z by 3,	or by the number	orye	:415	3	j	2.254702
the logination has been in exis	101100 11 1033	tnan 5 years	• •				_		
4 Enter the net value of noncharit	able-use as:	sets for 2014 from Part X.	line 5				4		23,334.
5 Multiply line 4 by line 3							5		52,611.
6 Enter 1% of net investment inco	ome (1% of	Part I, line 27b)					6		518.
							_		E2 120
7 Add lines 5 and 6							7	<del> </del>	53,129.
8 Enter qualifying distributions fro	nm Part VII	line 4					8		49,788.
If line 8 is equal to or greater th	-		th and some	data that now war	10 2 1	% tay rata		1	
See the Part VI instructions	an mie 7, Cl	IOON LIIG OOA III FAIL VI, IIIIB	, ro, and comp	note that half non	.y a I	יי נטא ומנט			

Form	990-PF (2014) FAMILY FOUNDATION 62-17	68433		Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	e instru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%		L,0	<u> 36.</u>
	of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
3	Add lines 1 and 2		1,0	36.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		L,0	36.
6	Credits/Payments Credits/Payments			
a	2014 estimated tax payments and 2013 overpayment credited to 2014			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld 6d			
	Total credits and payments Add lines 6a through 6d 7			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			4.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		L, 0	40.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		<u> </u>	
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ Refunded ▶ 11			
	rt VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	. 1b		Х
	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?	10		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation $\triangleright$ \$ 0. (2) On foundation managers $\triangleright$ \$			
е	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		Х
	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		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	. 4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	. 4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	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	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	
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," attach explanation	8b	X	<u></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	9_		X
40	Did any namena become substantial contributors during the toy year?	10		v

orm	990-PF (2014) FAMILY FOUNDATION	62-1768	433		Page <b>5</b>
Pá	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				
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	ļ	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory p	ortvileges?			
	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?	Í	13	X	
	Website address ► N/A		_		
14	The books are in care of ► KRAFT CPA'S  Telephone no	<b>►</b> 615 24	2-7	351	
	Located at ► 555 GREAT CIRCLE ROAD SUITE 200, NASHVILLE, TN	ZIP+4 ►37	228		
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	15	N	/A	
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	e of the			
	foreign country				
P	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
1 a	During the year did the foundation (either directly or indirectly).				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	es 🗶 No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
	a disqualified person?	es 🗓 No			
	<u> </u>	es X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	es 🗶 No 📗			
	(5) Transfer any income or assets to a disqualified person (or make any of either available				
	for the benefit or use of a disqualified person)?	es X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	İ			
	if the foundation agreed to make a grant to or to employ the official for a period after				
	termination of government service, if terminating within 90 days )	es 🗶 No 📗			
t	of the 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)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here				
0	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?		10		X
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))				
a	ı At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginnir	ig			
	before 2014?	es 🔼 No			
	If "Yes," list the years P,,,				
t	and 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 attact				
	statement - see instructions )	N/A	2b		
C	: if the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.				
32	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
	<u> </u>	es X No			
t	o If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons af			1	
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to c	1			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C	-			
	Form 4720, to determine if the foundation had excess business holdings in 2014)	N/A	3b	1	
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpos	e that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2014?		4h		X

Part VII-B Statements Regarding Activities for Which I	Form 4720 May be F	required (contint	Jea)	<del>, ,</del>
5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			s X No	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire			
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
4945(d)(4)(A)? (see instructions)		. L Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			
			s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und			4-	
section 53 4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h			▶∟∟	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for				
expenditure responsibility for the grant?	N	I/A 🗌 Ye	s L No	
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		Ye	s X No	
<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	helter transaction?	Ye	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu	utable to the transaction?		N/A	7b
Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	1	
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
JOHN HASSENFELD	TRUSTEE	5	Companication	
5009 HILL PLACE DRIVE				
NASHVILLE, TN 37205	1.00	0.	0.	0.
	TRUSTEE			
5009 HILL PLACE DRIVE	1			
NASHVILLE, TN 37205	1.00	0.	0.	0.
		•		
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(-1)	
(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	dovoted to position		comportsation	2303000
NOND	i			
	•			
	-	-		<del></del>
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	1			
		<del> </del>	<del></del>	· · · · · · · · · · · · · · · · · · ·
Total number of other ampleyees and over \$50,000	1	<u> </u>		0
Total number of other employees paid over \$50,000	<del></del>		Enrm	990-PF (2014)
			FUITI	

Form 990-PF (2014) F'AMILY F'OUNDATION	62-17	68433 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NO		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(3) 1) po 0/ 301/100	(b) componention
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		<u> </u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in	formation such as the	·
number of organizations and other beneficiaries served, conferences convened, research papers produced,	etc	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1	and 2.	Amount
1 N/A		
2		
All the second of the second o		
All other program-related investments. See instructions.		
3		

Form **990-PF** (2014)

Total. Add lines 1 through 3

Form 990-PF (2014) FAMILY FOUNDATION

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, se	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	10,802. 12,887.
b	Average of monthly cash balances	1b	12,887.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	23,689.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	23,689.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	355.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	23,334.
6	Minimum investment return. Enter 5% of line 5	6	1,167.
P	Distributable Amount (see Instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	1,167.
2a	Tax on investment income for 2014 from Part VI, line 5 2a 1,036.		
b	Income tax for 2014 (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	1,036. 131.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	131.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	131.
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	131.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish chantable, etc., purposes		40 700
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1 <u>a</u>	49,788.
þ	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the.		
а	Suitability test (prior IRS approval required)	3a	
þ	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	49,788.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_
	Income Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	49,788.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	jualifies for th	e section
	4040/a\ madication of the combination of the combina		

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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,		<del> </del>	. ,,	
line 7			, , , , , , , , , , , , , , , , , , , ,	131.
2 Undistributed income, if any, as of the end of 2014	1			
a Enter amount for 2013 only			0.	100404
b Total for prior years		_		
		0.	,,,	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
3 Excess distributions carryover, if any, to 2014				
a From 2009 60,706.				
b From 2010 44,744.				
c From 2011	1			
d From 2012 36,050.				
e From 2013 . 34,486.	175 006			
f Total of lines 3a through e	175,986.			
4 Qualifying distributions for 2014 from				
Part XII, line 4 ▶ \$ 49,788.			^	
a Applied to 2013, but not more than line 2a			0.	······································
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)			· '1111' · · · · · · · · · · · · · · · ·	''
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	<u> </u>		<u> </u>	131.
d Applied to 2014 distributable amount	49,657.			131.
e Remaining amount distributed out of corpus	49,037.		' 1 . 1'	0.
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	225,643.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b Taxable		_		
amount - see instructions		0.		
e Undistributed income for 2013 Subtract line			•	
4a from line 2a. Taxable amount - see instr			0.	·
f Undistributed income for 2014 Subtract	1			
lines 4d and 5 from line 1. This amount must				•
be distributed in 2015			······································	0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0			
may be required - see instructions)	0.		<del></del>	<del></del>
8 Excess distributions carryover from 2009	60,706.			
not applied on line 5 or line 7	00,700.			***************************************
9 Excess distributions carryover to 2015.	164,937.			
Subtract lines 7 and 8 from line 6a	104,937.	***************************************		<del></del>
10 Analysis of line 9 a Excess from 2010 44,744.				
a Excess from 2010 44, 744.				
c Excess from 2012 36,050.				
d Excess from 2013 34, 486.				
e Excess from 2014 49,657.				
423581	I			Form 000-DE (2014)

#### JOHN HASSENFELD

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

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

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

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

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year NASHVILLE JEWISH FOUNDATION NONE PUBLIC TO FURTHER THE EXEMPT 801 PERCY WARNER BLVD, SUITE 102 PURPOSES OF THE 750. NASHVILLE, TN 37205 FOUNDATION ABES GARDEN NONE PUBLIC TO FURTHER THE EXEMPT 618 CHURCH ST, SUITE 220 PURPOSES OF THE NASHVILLE, TN 37219 108. FOUNDATION NASHVILLE SCHOOL OF LAW NONE PUBLIC TO FURTHER THE EXEMPT 4013 ARMORY OAKS DRIVE PURPOSES OF THE NASHVILLE, TN 37204 FOUNDATION 108. KNOXVILLE MUSEUM ART NONE PUBLIC TO FURTHER THE EXEMPT 1050 WORLDS FAIR PARK DR PURPOSES OF THE KNOXVILLE, TN 37916 FOUNDATION 220. THE TEMPLE OHABAI SHOLOM NONE PUBLIC TO FURTHER THE EXEMPT 5015 HARDING PIKE PURPOSES OF THE NASHVILLE, TN 37205 FOUNDATION 1,525. SEE CONTINUATION SHEET(S) ➤ 3a 49,788. Total b Approved for future payment NONE 0. Total **▶** 3b

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

Enter gross amounts unless otherwise indicated.	Unrelated business income			d by section 512, 513, or 514	(e)	
•	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income	
1 Program service revenue	code		code			
a						
b	ļ			<del></del>		
C					<u> </u>	
d						
e				<u> </u>		
f	į		1 1.			
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash						
investments			14	1.		
4 Dividends and interest from securities		•				
5 Net rental income or (loss) from real estate			1			
			1			
a Debt-financed property			+ +			
b Not debt-financed property			+ +-	· <del>-</del>		
6 Net rental income or (loss) from personal property						
7 Other investment income						
8 Gain or (loss) from sales of assets other						
than inventory	1		18			
9 Net income or (loss) from special events		-				
10 Gross profit or (loss) from sales of inventory				-		
11 Other revenue			1			
			<del> </del>			
<u> </u>			<del>   </del>	<del></del>		
d			1			
6		0	+ +	<del></del> 1		
12 Subtotal Add columns (b), (d), and (e)		U	•1 1		0.	
13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.)		•		13 _	1.	
Line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other than			A contribut	ted importantly to the acco	mplishment of	
423621 11-24-14					Form <b>990-PF</b> (2014)	

FAMILY FOUNDATION

5	2-	17	68	4:	33	Page	1:

Pa	rt XVII	Information Re Exempt Organi		nsfers To a	and Transaction	s and	Relationsl	nips With	Nonchar	itable	)	
1	Did the o	rganization directly or indir		of the followin	g with any other organiz	zation de:	scribed in section	on 501(c) of	<del></del>		Yes	No
	the Code	(other than section 501(c)	(3) organizations) (	or in section 52	?7, relating to political or	rganizatio	ons?					
а	Transfers	s from the reporting founda	ition to a noncharita	able exempt or	ganization of							
	(1) Cast	ı								1a(1)		<u>X</u>
	(2) Othe	r assets				-	•			1a(2)		Х
		nsactions										
	• •	s of assets to a noncharital			•					1b(1)		<u>X</u>
		chases of assets from a nor		-				• •		1b(2)		X
		tal of facilities, equipment, (			••• •		-			1b(3)	-	X
		nbursement arrangements							•	1b(4)	-	X
		ns or loan guarantees				•	•			1b(5)		X
_	• •	ormance of services or me	•	-					•	1b(6)		X
	_	of facilities, equipment, mai swer to any of the above is	-			 d abuave	chow the fear or	arkat valus of	the goods o	1c	otc.	Λ
u		es given by the reporting fo									σι <b>5</b> ,	
		d) the value of the goods, (					•	Ū	,			
(a) ⊔	ne no	(b) Amount involved	(c) Name o	of noncharitable	exempt organization		(d) Description	of transfers, tran	sactions, and s	haring an	angeme	nts
				N/A								
			•									
										_		
	ļ											
	į											
										_		
	ın sectioi	undation directly or indirect in 501(c) of the Code (other complete the following sche	than section 501(c		tion 5272	ganizatıor 	ns described 			☐ Yes	X	] No
		(a) Name of org	anızatıon		(b) Type of organization	on	(	c) Description	of relationsh	ııp		
		N/A										
				<del></del>				<u> </u>				
	1				<u> </u>							
Sig He	re and t	er penalties of perjury, I declare to belief, it is true, correct, and con trusted in atture of officer or trustee	nplete Declaration of p			nformation		has any knowled	ige May return show	the IRS on with the wn below	e prepan (see ins	er
	1 0,0	Print/Type preparer's na		Preparer's s		Date		Check	ıf PTIN			
		. And type property S lie			beldridge	.   Date		self- employe				
Pa	id	PAM BALDRI	DGF		LDRIDGE	05	/04/15	con citipioye	i	291	120	
	eparer	Firm's name KRA		LLC	TIDITIDGE	<sub>U</sub> 3	104/17	Firm's EIN				
	e Only		LICEMO EI	UIIC				rirm's EIN	- 02-07	132	J (	
<del>.</del> .	o Omy	Firm's address ▶ 55	5 CDEAM (	י דסרי די	DOVD	<del>,</del>						<del></del>
				TN 372				Db	615-24	2-7	251	
		I NA	SHVILLE,	114 312	20			Phone no		rm <b>99</b> 0		(20+4)
									FO	いい おおし	/-rr	120141

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

OMB No 1545-0047

**Employer identification number** 

Name of the organization

THE JOHN AND HEIDI HASSENFELD FAMILY FOUNDATION

62-1768433

Organization type (check one):						
Filers of	<del>:</del>	Section:				
Form 99	0 or 990-EZ	501(c)( ) (enter number) organization				
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation				
		527 political organization				
Form 99	0-PF	X 501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
	nly a section 501(c)(	covered by the <b>General Rule</b> or a <b>Special Rule.</b> 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.				
	For an organization	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
Special	Rules					
	sections 509(a)(1) any one contributo	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from r, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, line 1. Complete Parts I and II.				
	year, total contribu	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for ruelty to children or animals. Complete Parts I, II, and III.				
	year, contributions is checked, enter h purpose. Do not co	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., implete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year				
		at is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to				

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

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Employer identification number

62-1768433

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

ran i	Contributors (see instructions). Ose duplicate copies of Part 1	ii additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JOHN E. HASSENFELD  5009 HILL PLACE DRIVE  NASHVILLE, TN 37205	\$\$	Person Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	JOHN E. HASSENFELD  5009 HILL PLACE DRIVE  NASHVILLE, TN 37205	\$\$	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	JOHN E. HASSENFELD  5009 HILL PLACE DRIVE  NASHVILLE, TN 37205	\$	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	JOHN E. HASSENFELD  5009 HILL PLACE DRIVE  NASHVILLE, TN 37205	\$\$.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) <b>N</b> o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	JOHN E. HASSENFELD  5009 HILL PLACE DRIVE  NASHVILLE, TN 37205	\$\$.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	JOHN E. HASSENFELD  5009 HILL PLACE DRIVE  NASHVILLE, TN 37205	\$\$.	Person Payroll Complete Part II for noncash contributions.)
423452 11-0			000 000-F7 or 000-PE\ /201/\

Employer identification number

62-1768433

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a)	(b)	(c)	(d) Type of contribution
No.	Name, address, and ZIP + 4	Total contributions	
7	JOHN E. HASSENFELD  5009 HILL PLACE DRIVE  NASHVILLE, TN 37205	\$9,877.	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
8	JOHN E. HASSENFELD  5009 HILL PLACE DRIVE  NASHVILLE, TN 37205	\$11,092.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
9	JOHN E. HASSENFELD  5009 HILL PLACE DRIVE  NASHVILLE, TN 37205	\$	Person Payroll Moncash X  (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions.)

Employer identification number

62-1768433

Part II	Noncash Property	(see instructions). Use duplicate copies of Part II if additional space is needed.
---------	------------------	--

<del></del>
c) (d) estimate) Date received
10/23/14
estimate) (d) Date received
88,080. 12/29/14
stimate) (d) Date received
7,193. 12/30/14
c) (d) stimate) Date received
4,055. 12/30/14
) (d) stimate) Date received
25,682. 12/30/14
) stimate) uctions) (d) Date received
25,650. 12/30/14 chedule B (Form 990, 990-EZ, or 990-PF) (2

Employer identification number

62-1768433

Part II Nor	cash Property (see	instructions). Use dupli	icate copies of Part II if a	dditional space is needed.
-------------	--------------------	--------------------------	------------------------------	----------------------------

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
7	160 SHS ISIS PHARM INC.		
		\$\$	12/30/14
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
8	111 SHS MIDDLEBY CORP DEL		
		\$\\$	12/30/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
9	92 SHS STARZ SERIES A		
		\$\\$\$	12/30/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		   \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		*	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	190, 990-EZ, or 990-PF) (3

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization

THE JOHN AND HEIDI HASSENFELD

FAMILY FOUNDATION

Exclusively religious, charitable, etc., contribute year from any one contributor. Complete color

Employer identification number

'AMILY	FOUNDATION		62-1768433			
Part III	the year from any one contributor. Complete	columns (a) through (e) and the follo	in section 501(c)(7), (8), or (10) that total more than \$1,000 for wing line entry. For organizations			
	completing Part III, enter the total of exclusively religion.  Use duplicate copies of Part III if addition		r less for the year (Enter this into. once.)			
(a) No. from Part !	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gif	t			
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift					
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift					
-	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift					
_	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			

	INGS AND TEM	PORARY	CASH I	NVESTMENTS	STATEMENT	1
SOURCE	(A REVEI PER BO	NUE		(B) NVESTMENT NCOME	(C) ADJUSTED NET INCOM	
WELLS FARGO		1.		1.		
TOTAL TO PART I, LINE 3		1.		1.		
FORM 990-PF	ACCOUNTI	NG FEE	5	·	STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	NET I	3) NVEST- INCOME	(C) ADJUSTED NET INCOM		
KRAFT CPAS	993.		993.			0.
TO FORM 990-PF, PG 1, LN 16B	993.		993.		·····	0.
FORM 990-PF	TAX	ES			STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTEI NET INCOM		
DESCRIPTION TAXES	EXPENSES	NET I	NVEST-	ADJUSTED	CHARITA	
	EXPENSES PER BOOKS	NET I	NVEST- INCOME	ADJUSTED	CHARITA	ES
TAXES	EXPENSES PER BOOKS  147.	NET I	NVEST-INCOME  147.  147.	ADJUSTED NET INCOM	CHARITA	0.
TAXES TO FORM 990-PF, PG 1, LN 18	EXPENSES PER BOOKS  147.	NET I	NVEST-INCOME  147.  147.	ADJUSTED NET INCOM	O CHARITA ME PURPOS	0.
TAXES  TO FORM 990-PF, PG 1, LN 18  FORM 990-PF OTHER DECREASE	EXPENSES PER BOOKS  147.  147.  ES IN NET AS	NET IN MENT	NVEST-INCOME  147.  147.  R FUND	ADJUSTED NET INCOM	CHARITA ME PURPOS	0. 0. 4

FORM 990-PF CORPORATE STOC	K	STATEMENT !
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
WELLS FARGO STOCK MORGAN STANLEY STOCK	5,970. 14,608.	86,655 86,278
TOTAL TO FORM 990-PF, PART II, LINE 10B	20,578.	172,933

Part XV Supplementary Informati				- 
3 Grants and Contributions Paid During the		1		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
CURRY INGRAM ACADEMY	none	PUBLIC	TO FURTHER THE EXEMPT	
6544 MURRAY LANE			PURPOSES OF THE	
BRENTWOOD, TN 37027	-		FOUNDATION	60.
BETA NU SIGMA CHI	NONE	PUBLIC	TO FURTHER THE EXEMPT PURPOSES OF THE	
PROVIDENCE, RI 02912			FOUNDATION	150.
GILDA'S CLUB - NASHVILLE	NONE	PUBLIC	TO FURTHER THE EXEMPT	
1707 DIVISION STREET			PURPOSES OF THE	
NASHVILLE, TN 37203			FOUNDATION	36.
USN ANNUAL FUND	NONE	PUBLIC	TO FURTHER THE EXEMPT	
2000 EDGEHILL AVE			PURPOSES OF THE	
NASHVILLE, TN 37212			FOUNDATION	2,500.
YOUTH VILLAGES	NONE	PUBLIC	TO FURTHER THE EXEMPT	
3310 PERIMETER HILL DR			PURPOSES OF THE	
NASHVILLE, TN 37211			FOUNDATION	100.
		D		
THE FRIST	NONE	PUBLIC	TO FURTHER THE EXEMPT	
919 BROADWAY			PURPOSES OF THE FOUNDATION	100.
NASHVILLE, TN 37203			FOUNDATION	100.
GILDA'S CLUB - NASHVILLE	NONE	PUBLIC	TO FURTHER THE EXEMPT	
1707 DIVISION STREET		[	PURPOSES OF THE	
NASHVILLE, TN 37203			FOUNDATION	290.
BOOK 'EM	NONE	PUBLIC	TO FURTHER THE EXEMPT	
421 GREAT CIRCLE ROAD			PURPOSES OF THE	
NASHVILLE, TN 37228			FOUNDATION	50.
AKIVA SCHOOL	NONE	PUBLIC	TO FURTHER THE EXEMPT	
809 PERCY WARNER BLVD			PURPOSES OF THE	
NASHVILLE, TN 37205			FOUNDATION	1,800.
JEWISH FAMILY SVC	NONE	PUBLIC	TO FURTHER THE EXEMPT	
801 PERCY WARNER BLVD # 103			PURPOSES OF THE	70
NASHVILLE, TN 37205  Total from continuation sheets		-1	FOUNDATION	72. 47,077.
TOTAL HOME COMMINGRIUM SHEETS	<u> </u>	· <u>-</u>		47,077.

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or **Amount** status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient GORDON JEWISH COMMUNITY CENTER NONE PUBLIC TO FURTHER THE EXEMPT PURPOSES OF THE 801 PERCY WARNER BLVD NASHVILLE, TN FOUNDATION 100. THE CONSERVANCY NONE PUBLIC TO FURTHER THE EXEMPT 2021 21ST AVE S # C400 PURPOSES OF THE NASHVILLE, TN 37212 FOUNDATION 50. THE TEMPLE NONE PUBLIC TO FURTHER THE EXEMPT 5015 HARDING PIKE PURPOSES OF THE NASHVILLE, TN 37205 FOUNDATION 55. CURRY INGRAM ACADEMY NONE PUBLIC TO FURTHER THE EXEMPT 6544 MURRAY LANE PURPOSES OF THE BRENTWOOD, TN 37027 FOUNDATION 90. LEGAL AID SOCIETY NONE PUBLIC TO FURTHER THE EXEMPT 300 DEADERICK STREET PURPOSES OF THE NASHVILLE, TN 37201 FOUNDATION 100. NONE HOMEWORK HOTLINE PUBLIC TO FURTHER THE EXEMPT 4805 PARK AVE PURPOSES OF THE NASHVILLE, TN 37209 FOUNDATION 100. HADASSAH NONE TO FURTHER THE EXEMPT PUBLIC PURPOSES OF THE FOUNDATION NASHVILLE, TN 72. JEWISH FEDERATION OF NASHVILLE NONE PUBLIC TO FURTHER THE EXEMPT 801 PERCY WARNER BLVD # 101 PURPOSES OF THE NASHVILLE, TN 37205 FOUNDATION 33,000. VANDERBILT OWEN SCHOOL NONE PUBLIC TO FURTHER THE EXEMPT 401 21ST AVE S PURPOSES OF THE 90. NASHVILLE, TN 37203 FOUNDATION WEST END SYNAGOGUE NONE PUBLIC TO FURTHER THE EXEMPT 3810 WEST END AVE PURPOSES OF THE NASHVILLE, TN 37205 FOUNDATION 6,734. Total from continuation sheets

Part XV Supplementary Information	on			
3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	- Contribution	•
ALIVE HOSPICE	NONE	PUBLIC	TO FURTHER THE EXEMPT	
1718 PATTERSON ST			PURPOSES OF THE	
NASHVILLE, TN 37203			FOUNDATION	252.
RABBI FALK ENDOWED SCHOLARSHIP	NONE	PUBLIC	TO FURTHER THE EXEMPT	
			PURPOSES OF THE	
NASHVILLE, TN			FOUNDATION	180
CAMP RAMAH DAROM	NONE	PUBLIC	TO FURTHER THE EXEMPT	
70 CAMP DAROM			PURPOSES OF THE	
CLAYTON, GA 30525			FOUNDATION	100.
GET CONNECTED	NONE	PUBLIC	TO FURTHER THE EXEMPT	
2001 OLD HICKORY BLVD	HOME	FORDIC	PURPOSES OF THE	
BRENTWOOD, TN 37027		İ	FOUNDATION	72.
2.				
		L		
GORDON JEWISH COMMUNITY CENTER	NONE	PUBLIC	TO FURTHER THE EXEMPT	
801 PERCY WARNER BLVD			PURPOSES OF THE	F00
NASHVILLE, TN 37205			FOUNDATION	500.
NASHVILLE OIC	NONE	PUBLIC	TO FURTHER THE EXEMPT	
1819 CHARLOTTE AVE			PURPOSES OF THE FOUNDATION	100
NASHVILLE, TN 37203			FOUNDATION	100.
SECOND HARVEST FOOD BANK	NONE	PUBLIC	TO FURTHER THE EXEMPT	
331 GREAT CIRCLE ROAD			PURPOSES OF THE	100
NASHVILLE, TN 37228			FOUNDATION	108.
VANDERBILT HILLEL	NONE	PUBLIC	TO FURTHER THE EXEMPT	
2421 VANDERBILT PLACE			PURPOSES OF THE	100
NASHVILLE, TN 37212			FOUNDATION	108.
GIVE DIRECTLY	NONE	PUBLIC	TO FURTHER THE EXEMPT	
PO BOX 3221			PURPOSES OF THE	
NEW YORK, NY 10008			FOUNDATION	72.
ALPHA CHI OMEGA	NONE	PUBLIC	TO FURTHER THE EXEMPT	
			PURPOSES OF THE	
NASHVILLE, TN			FOUNDATION	36.
Total from continuation sheets				